

VIOLATING CHILDREN'S RIGHTS:

Harmful practices based on tradition, culture, religion or superstition

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A report from the International NGO Council on Violence against Children

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The International NGO Council on Violence against Children

The International NGO Council on Violence against Children (formerly the NGO Advisory Council for follow-up to the UN Secretary-General's Study on Violence against Children) was established in 2006 to work with NGOs and other partners, including member states, to ensure that the recommendations from the UN Study on Violence against Children are effectively implemented. The International NGO Council includes representatives from nine international NGOs, including major human rights and humanitarian agencies, as well as nine representatives selected from their regions.

The International NGO Council works closely with the Special Representative to the Secretary-General on Violence against Children, and encourages and maintains NGO involvement at the national, regional, and international levels in follow-up advocacy with governments, UN agencies and others for full implementation of the Study recommendations. A full list of membership may be found in the Acknowledgements, and further information on the International NGO Council may be found at: <http://www.crin.org/violence/adccouncil/index.asp>

Table of contents

Acknowledgements.....	iv
Foreword	v
Acronyms.....	vii
1. Introduction	1
2. What do we mean by harmful practices affecting children based on tradition, culture, religion or superstition?.....	5
3. The human rights imperative to prohibit and eliminate harmful practices affecting children based on tradition, culture, religion or superstition	9
Prohibition as a foundation for elimination	14
Building on prohibition – other measures	17
4. Examples of harmful practices affecting children based on tradition, culture, religion or superstition.....	19
5. Recommendations	41
Integration into follow-up to the UN Secretary-General's Study on Violence against Children.....	41
Recommendations addressed to international and regional bodies	43
Recommendations for action at national and local levels.....	46

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Foreword

MARTA SANTOS PAIS

UN Special Representative of the Secretary-General on Violence against Children



The protection of children from harmful practices is of critical relevance for the realization of children's rights. Across regions, millions of children have been subject to various forms of harmful practices, some better known and others that may remain undocumented. Common for most of these practices is that they have devastating consequences on the child's life, development, health, education and protection.

Addressing harmful practices as a core concern for the process of follow up to the United Nations Study on Violence against Children provides a solid basis for advancing our common goal to effectively protect children from all forms of violence, wherever they may occur. Indeed, the UN Study on Violence against Children urged states to prohibit by law all forms of violence against children, including harmful practices. This recommendation is a key priority for my mandate.

I welcome this important publication by the International NGO Council on Violence against Children on harmful practices affecting children based on tradition, culture, religion or superstition. The report recalls the sound international normative framework for prohibiting and promoting the abandonment of such harmful practices, and presents a comprehensive inventory of harmful practices that require urgent action by Member States, UN actors and civil society organizations, at the international, national and local levels.

I am confident that this publication and my continuing fruitful collaboration with the NGO Council will be critical contributions for the consolidation of the right of the child to freedom from all forms of violence, including harmful practices, everywhere and at all times.

PAULO SÉRGIO PINHEIRO

The independent expert who led the UN Secretary General's Study on Violence against Children; Chairperson, UN Human Rights Council Independent International Commission of Inquiry on Syria 2011-2012.

The report of the UN Secretary General's Study, which I had the privilege to lead, asserted that the Study should mark "a turning point - an end to adult justification of violence against children, whether accepted as 'tradition' or disguised as 'discipline.' There can be no compromise in challenging violence against children [...]."



Six years have passed and adults and governments in a majority of states across the world are still indulging in justification and compromise. The definition of the practices highlighted in this depressing but vital report from the International NGO Council is that they are generally perpetrated by parents or others close to children in their communities and they are condoned or actively approved on grounds of tradition, culture, religion or superstition.

The report does indeed illustrate a devastating failure of international and regional human rights mechanisms to provoke the necessary challenge to these practices and their effective prohibition and elimination in all regions. It marks a failure of political and community leadership to move parents, families and societies on from harmful practices to cultures fully respectful of children's rights. It marks a failure of religious leaders to insist that no form of violence against children can be justified in the name of religion and to highlight, as the Convention on the Rights of the Child does, children's own right to freedom of religion.

This report builds on the key recommendations of the UNSG's Study. It identifies a range of international, regional and national bodies that need to work urgently and more visibly to end adults' inexcusable justification of inhumanity to children.

Acronyms

CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CIS	Commonwealth of Independent States
CRC	Convention on the Rights of the Child
DAW	Division for the Advancement of Women
FGM	Female Genital Mutilation
GAMCOTRAP	Gambia Committee on Traditional Practices Affecting the Health of Women and Girls
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
ICESCR	International Covenant on Economic, Social and Cultural Rights
ILO	International Labour Organization
INGO	International Non-Governmental Organization
IPC	Indian Penal Code
KNMG	The Royal Dutch Medical Association
NGO	Non-Governmental Organization
NHRIs	National Human Rights Institutions
OHCHR	Office of the High Commissioner for Human Rights
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNECA	United Nations Economic Commission for Africa
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNGA	United Nations General Assembly
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNIFEM	United Nations Development Fund for Women
UNODC	United Nations Office on Drugs and Crime
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
WHO	World Health Organization
WMA	World Medical Association

INTRODUCTION



High school girls in Suapur, Bangladesh. © Scott Wallace, World Bank

1. Introduction

Each year, thousands of children die worldwide and the childhoods and development of millions more are scarred by harmful practices perpetrated by parents, relatives, religious and community leaders and other adults.

All violations of children's rights can legitimately be described as harmful practices, but the common characteristic of the violations highlighted in this report is that they are based on tradition, culture, religion or superstition and are perpetrated and actively condoned by the child's parents or significant adults within the child's community. Indeed, they often still enjoy majority support within communities or whole states.

Many of the identified practices involve gross and unlawful discrimination against groups of children, including gender discrimination, and in particular discrimination against children with disabilities. Some are based on tradition and/or superstition, some on religious belief, others on false information or beliefs about child development and health. Many involve extreme physical violence and pain leading, in some cases intentionally, to death or serious injury. Others involve mental violence. All are an assault on the child's human dignity and violate universally agreed international human rights standards.

The International NGO Council on Violence against Children believes the continued legality and social and cultural acceptance of a very wide range of these practices in many states illustrates a devastating failure of international and regional human rights mechanisms to provoke the necessary challenge, prohibition and elimination. Comprehensive, children's rights-based analysis and action are needed now. Above all, there must be an assertion of every state's immediate obligation to ensure all children their right to full respect for their human dignity and physical integrity.

Harmful practices based on tradition, culture, religion or superstition are often perpetrated against very young children or infants, who are clearly lacking the capacity to consent or to refuse consent themselves. Assumptions of parental powers or rights over their children allow the perpetration of a wide range of these practices, many by parents directly, some by other individuals with parents' assumed or actual consent. Yet the UN Convention on the Rights of the Child (CRC), ratified by almost every state, favours the replacement of the concept of parental "rights" over children with parental "responsibilities," ensuring that the child's best interests are parents' "basic concern" (Article 18).

The CRC also upholds the child's own independent right to religious freedom (Article 14). Children are not born into a religion. Every individual has the right to religious freedom. Thus, parents and others cannot quote their adult religious beliefs to justify perpetrating harmful practices on a child, before she or he has the capacity to provide informed consent.

The child's right to life, survival and maximum development and the right to health and health services place an active duty on the state to ensure parents are equipped with accurate information on child health and development. Such information will enable parents to fulfil their responsibilities and to not harm their children either through administering harmful treatments or through withholding necessary and proven treatments. Where parents fail their children, states must intervene.

Harmful traditional or cultural practices have been a concern of the United Nations from early in its history, first highlighted in a General Assembly resolution more than 50 years ago. The Commission on Human Rights, formed in 1946, adopted its first resolution on "traditional practices affecting the health of women and children" in 1984. A Special Rapporteur on traditional practices affecting the health of women and the girl child was first appointed in 1988. Many UN bodies and specialized agencies have addressed harmful traditional practices, among them OHCHR, UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCR, UNICEF, UN Women and WHO.

Most of the high-profile literature, debates and action on harmful practices have focused on particular widespread practices that primarily affect girls and women, in particular female genital mutilation (FGM) and child marriage. These practices

constitute systematic and severe violations of the rights of millions of children and the international, rights-based focus on them has certainly resulted in much greater visibility. But universal prohibition and elimination still seems distant. For example, a 2008 statement from ten UN or UN-related agencies on "Eliminating female genital mutilation" estimates that three million girls were at risk of undergoing FGM each year in Africa, and that between 100 and 140 million girls and women worldwide have been subjected to some form of FGM.

"In every region, in contradiction to human rights obligations and children's developmental needs, violence against children is socially approved and is frequently legal and state-authorised."

UN Secretary-General's Study on Violence against Children

The introduction to the 2006 report of the UN Secretary-General's Study on Violence against Children notes: "In every region, in contradiction to human rights obligations and children's developmental needs, violence against children is socially approved and is frequently legal and state-authorised." The report urged that the UN Study should mark a turning point, "an end to adult justification of violence against children, whether accepted as 'tradition' or disguised as 'discipline.' There can be no compromise in challenging violence against children [...]."

The UN Study did not have the resources to research in detail harmful practices affecting children that are based on tradition, culture, religion or superstition. The issue was raised, including during the UN Study's nine regional consultations, and the report explicitly recommends the prohibition "of all forms of violence against children in all settings, including all corporal punishment, harmful traditional practices including early and forced marriage, female genital mutilation and so-called honour crimes [...]."

It also proposes that “States and civil society should strive to transform attitudes that condone or normalize violence against children, including stereotypical gender roles and discrimination, acceptance of corporal punishment and harmful traditional practices...” (A/61/299, overarching recommendations 2 and 4, paras. 97 and 100).

But the “turning point” has not arrived for children. They are still waiting for a rigorous global investigation, covering every region and state, to identify the full range of these harmful practices that violate girls’ and boys’ rights, including new or newly visible practices and others spread through migration. It is essential that the individual practices and the particular rights they violate should be identified, made visible and unambiguously condemned in every society in which they occur.

The International NGO Council is mandated to follow up the recommendations of the UN Study.

“To abandon these practices, countries need to address their root causes. Law reform on violence against children, including harmful practices, is an essential component of this process and cannot be reduced to isolated or fragmented actions or ignore the role of customary and religious law.”

Marta Santos Pais at International Consultation Addis Ababa, June 2012

This short report is designed to complement other current activities in the UN system that are focusing on harmful practices and children and will hopefully lead to more effective action. The UN Secretary-General’s Special Representative on Violence against Children, Marta Santos Pais, held an International Expert Consultation on the issue in June 2012 in Addis Ababa in which the International NGO Council was represented and prepared a submission. Two UN Treaty Bodies, the Committee on the Rights of

the Child and the Committee on the Elimination of Discrimination against Women (CEDAW), are collaborating in drafting a General Comment/General Recommendation on harmful practices.

The International NGO Council believes that the continuing legal and social acceptance of these violations and the slow progress in identifying and effectively addressing them are symptomatic of children’s low status, as possessions rather than individuals and rights-holders, in societies across all regions. The oft-quoted mantra of the UN Study was “No violence against children is justifiable; all violence against children is preventable.” Tragically, many adults are still justifying even extreme violence, both physical and mental, on spurious grounds of tradition, culture or religion.

The report first looks at the definition and scope of harmful traditional, cultural and religious practices violating children’s rights. Section 3 outlines the

human rights context for their prohibition and elimination. Section 4 lists practices identified through a call for evidence issued by the International NGO Council

earlier in 2012 and additional desk research. It also provides some examples of legal and other measures already taken to challenge and eliminate them. Section 5 provides recommendations for action by states, UN and UN-related agencies, INGOs, NGOs, national human rights institutions and others.

WHAT DO WE MEAN BY HARMFUL PRACTICES?



Amani Sa'eed and Samir Hassan sit with their children, including their daughters Shimus, 4, and Donya, 18 months, outside their home in Sufi Al Bashir Village, Kassala State (Sudan). FGM/C is still widely practiced in the village. Ms. Amani was subjected to FGM/C as a child, and experienced related complications delivering her children. "Both my husband and I do not want our daughters to be circumcised," she said. "It has caused me so many problems, and we do not want them to suffer too." © UNICEF/NYHQ2009-1478/Kate Holt

2. What do we mean by harmful practices affecting children based on tradition, culture superstition or religion?

"I remember my mother and her sister-in-law took us two girls, and there were four other girls. We went to Sarkapkan for the procedure. They put us in the bathroom, held our legs open, and cut something. They did it one by one with no anesthetics. I was afraid, but endured the pain. I had one week of pain. After that just a little bit. I never went to the doctors. [They were] never concerned. I have lots of pain in this specific area they cut when I menstruate." (Gola S., 17-year old student, Iraq)¹

"The healing ceremonies took place in the revivalist churches. One pastor burned my body with candles. A prophet mama covered my body with a red cloth. In yet another church, they poured the sap from a tree into my eyes. It stung terribly. The healer said that the witchcraft had gone. My eyes hurt so badly." (11 year old girl in Kinshasa recounts her "deliverance")²

"I finished seventh grade, and left [school] because of marriage...I didn't want to get married, but my father forced me to. He told me that education won't do anything for me. He said 'get married and live in splendor'...I didn't know my husband beforehand. My father told me that I have to agree [to get married]...I had no choice." (Sultana H., Yemen)³

As noted in the Introduction, harmful traditional practices have been condemned at the United Nations since its early years. A UN General Assembly resolution in 1954 highlighted "customs, ancient laws and practices relating to marriage and the family" which were inconsistent with principles in the 1948 Universal Declaration of Human Rights. It called among other things for abolition of the practice of the bride price, elimination of child marriage and the betrothal of young girls before the age of puberty (UNGA Resolution 843 (IX)). In 1984, the Commission on Human Rights adopted its first resolution on "traditional practices affecting the health of women and children" (1984/48, 13 March 1984) and the issue became a regular item on the Commission's (now the Human Rights Council's) agenda.

1 Human Rights Watch. (2010). Iraq: "They Took Me and Told Me Nothing."

2 UNICEF, *Children Accused of Witchcraft - An anthropological study of contemporary practices in Africa*.

3 Human Rights Watch. (2010). Yemen: "How Come You Allow Little Girls to Get Married?"

The overwhelming focus of attention in the UN system has been on harmful traditional practices affecting women and girls, with a strong gender inequality and discrimination perspective. The practices that have received the most attention to date in terms of debate, data collection and challenge through legal and other measures, have been FGM and child marriage.

Some have favoured dropping the word “traditional” because it may offend communities who value their traditions. Highlighting harmful traditions does not in any sense deny the existence of positive, non-harmful traditions but it cannot be denied that many extraordinarily harmful practices affecting children have become hallowed by tradition, which is what makes them so particularly difficult to challenge and eliminate. That, surely, is why the UN system over 50 years and the drafters of the CRC and other instruments have chosen to single out harmful traditional practices for special and urgent attention. Any hesitancy in challenging these practices as human rights violations will delay still further their elimination.

Another quoted reason for dropping “traditional” in this context is that there are contemporary harmful practices, both new and emerging, which cannot accurately be described as “traditional” but are nonetheless condoned within a culture or community. Rather than dropping “traditional,” we believe it is more productive to extend the concept of “harmful traditional practices” to “harmful practices based on tradition, culture, religion or superstition” (assuming social is subsumed in cultural). This rewording includes the possibility of new practices unsanctified by tradition but does not lose focus on the task, which is to find the most effective way to eliminate practices that are accepted as conventional and right by many individuals in the child’s life.

We note that the working title of the draft joint CRC/ CEDAW General Comment refers simply to “harmful practices,” as do some other recent UN documents. We fear this terminology fails to highlight the justification for a special focus on harmful practices, which are actively condoned or defended by parents and/or other adults in the child’s community. All violations of children’s rights can legitimately be described as harmful practices.

THE RIGHT OF THE CHILD TO FREEDOM FROM ALL FORMS OF VIOLENCE

No violence against children is justifiable; all violence against children is preventable;

A child rights-based approach to child caregiving and protection requires a paradigm shift towards respecting and promoting the human dignity and the physical and psychological integrity of children as rights-bearing individuals rather than perceiving them primarily as ‘victims’;

The concept of dignity requires that every child is recognized, respected and protected as a rights holder and as a unique and valuable human being with an individual personality, distinct needs, interests and privacy;... (para. 3)

Committee on the Rights of the Child, General Comment No. 13, 2011

We emphasise that our reason for seeking urgent and intensified advocacy to prohibit and eliminate the harmful practices based on tradition, culture, religion or superstition that are identified in this report is the persisting and very strong approval of them, often linked to their legality, or assumed legality in direct conflict with their identification as human rights violations. And overall, children's low status in societies and unique developmental vulnerability justifies special attention on the harmful practices that affect them.

What characterises the harmful practices listed in this report (outlined in Section 4) is that they remain approved and common in particular communities, states, regions and in some cases globally because of one or more of the following:

- **Tradition:** the transmission of customs or beliefs from generation to generation;
- **Culture:** the ideas, customs and social behaviour of a particular people or society;
- **Religion:** practices required or encouraged in religious texts or teaching, or believed to be so.
- **Superstition:** widely held but irrational beliefs, not based on reason or knowledge.

The list includes a number of practices perpetrated through false beliefs about child development and the cause and treatment of ill-health. These may stem from religious edict or belief, or from tradition or superstition or in some cases be promoted by health practitioners. The CRC specifically refers to "traditional practices prejudicial to the health of children" (Article 24(3)).

WHAT IS EXCLUDED?

It may still be argued that "harmful practices based on tradition, culture, religion or superstition" cover many or even most violations of children's rights. For example, the denial of education to girls, excessive use of child imprisonment, unnecessary institutionalization, segregation of children with disabilities and discriminatory treatment of minorities can all be said to be harmful practices actively condoned by many cultures.

The truth of this has to be acknowledged. But the purpose of this report and exercise is to focus more effective advocacy on particular practices, which appear to have been neglected because of their strong acceptance within the child's community. We have therefore excluded those clusters of violations of children's rights which, while they arguably are "based on tradition, culture, religion or superstition" have already triggered substantial advocacy – albeit not uniformly successful - by human rights agencies, including the development of special treaties and internationally-agreed goals and programmes; for example, advocacy on education, juvenile justice, child labour, gender discrimination, disability and sexual abuse and exploitation. We accept that these inclusions or exclusions may at times seem arbitrary but hope they will serve to provoke more comprehensive and rights-based debate and action to challenge more effectively adult approval of grave and systematic violations of children's rights.

THE HUMAN RIGHTS IMPERATIVE



At a primary school in Amhara Programme Unit, Plan works with the children's parliament and girls' club to encourage children to discuss their roles and take part in activities advocating for the elimination of child marriage. Plan Ethiopia works with its partners to prevent other harmful traditional practices and minimise the effects of early marriage and female genital mutilation on girls. Plan's 'Because I am a Girl' campaign has identified these two issues to be major obstacles to gender equality and has earmarked these as areas that Plan will increase its work on in the next three years. © Plan International

3. The human rights imperative to prohibit and eliminate harmful practices affecting children based on tradition, culture, religion or superstition

“I am the one who does all the housework...I do the cooking and take care of the household items. [My brother] just eats and goes out to play.”
*(10-year-old Ethiopian girl who cares for her HIV-positive mother)*⁴

The harmful practices based on tradition, culture, religion or superstition, which are the subject of this report, are violations of human rights. Allowing them to persist and in some cases to remain lawful places states in breach of their human rights obligations. The practices listed in Section 4 vary in their form and impact. Most involve discrimination against children or against specific groups of children. Many involve direct violence, often extreme. The CRC and other core international and regional human rights instruments insist on non-discrimination. They safeguard the rights to life, survival, health and maximum development; to protection from all forms of physical and mental violence; and from torture and cruel, inhuman or degrading punishment and treatment.

While there are also specific references to harmful practices in the CRC, the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and in regional instruments (detailed in the box below), these augment rather than replace the protection provided by the more general rights.

Both the Committee on the Rights of the Child and the Committee on the Elimination of Discrimination against Women have addressed harmful traditional practices in their respective General Comments and General Recommendations.⁵ And, as noted in the Introduction, these two UN Treaty Bodies are working (2012) on a joint General Comment/General Recommendation on harmful practices.

In its 2011 General Comment No. 13 on “The right of the child to freedom from all forms of violence,” the Committee on the Rights of the Child first provides “fundamental assumptions and observations” on which the General Comment is based.

4 UNICEF. (2008). *From Invisible to Indivisible – Promoting and Protecting the Right of the Girl Child to be Free from Violence*.

5 The Committee on the Rights of the Child in its General Comments Nos. 3 (2003), 4 (2003), 7 (2005), 8 (2006), 9 (2006), 11 (2009), 12 (2009), and in particular in its latest, No.13 (2011) on *The right of the child to freedom from all forms of violence*. The Committee on the Elimination of Discrimination against Women in its General Recommendations Nos. 14 (1990), 19 (1992), 21 (1994), and 24 (1999). See <http://www2.ohchr.org/english/bodies/>

These include:

- No violence against children is justifiable; all violence against children is preventable;
- A child rights-based approach to child caregiving and protection requires a paradigm shift towards respecting and promoting the human dignity and the physical and psychological integrity of children as rights-bearing individuals rather than perceiving them primarily as 'victims';
- The concept of dignity requires that every child is recognized, respected and protected as a rights-holder and as a unique and valuable human being with an individual personality, distinct needs, interests and privacy;[...]."⁶

The Committee notes its consistent interpretation of the CRC as emphasising that "all forms of violence against children, however light, are unacceptable," also that "frequency, severity of harm and intent to harm are not prerequisites for the definitions of violence." While states may refer to such factors in intervention strategies in order to allow proportional responses in the best interests of the child, "definitions must in no way erode the child's absolute right to human dignity and physical and psychological integrity by describing some forms of violence as legally and/or socially acceptable."⁷

The Committee notes that existing initiatives to prevent and to respond to all forms of violence against children are generally insufficient. Among the challenges identified by the Committee are that "legal frameworks in a majority of States still fail to prohibit all forms of violence against children, and where laws are in place, their enforcement is often inadequate. Widespread social and cultural attitudes and practices condone violence. The impact of measures taken is limited by lack of knowledge, data and understanding of violence against children and

6 Committee on the Rights of the Child. (2011). General Comment No. 13, *The right of the child to freedom from all forms of violence*, CRC/C/GC/13, para. 3. Retrieved from http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf

7 *Ibid.*; See para. 17

its root causes, by reactive efforts focusing on symptoms and consequences rather than causes, and by strategies which are fragmented rather than integrated. Resources allocated to address the problem are inadequate."⁸

The General Comment includes a non-comprehensive list of harmful practices:

- Corporal punishment and other cruel or degrading forms of punishment;
- Female genital mutilation;
- Amputations, binding, scarring, burning and branding;
- Violent and degrading initiation rites; force-feeding of girls; fattening; virginity testing (inspecting girls' genitalia);
- Forced marriage and early marriage;
- "Honour" crimes; "retribution" acts of violence (where disputes between different groups are taken out on children of the parties involved); dowry-related death and violence;
- Accusations of "witchcraft" and related harmful practices such as "exorcism;"
- Uvulectomy and teeth extraction.⁹

The Committee's General Comment No. 4, on "Adolescent health and development in the context of the Convention on the Rights of the Child" strongly urges States parties to "develop and implement legislation aimed at changing prevailing attitudes, and address gender roles and stereotypes that contribute to harmful traditional practices," and to "protect adolescents from all harmful traditional practices, such as early marriages, honour killings and female genital mutilation." It also recommends that States parties review and, where necessary, reform their legislation and practice to increase the minimum age for marriage with and without parental consent to 18 years, for both girls and boys.¹⁰

8 *Ibid.*; See para. 12

9 *Ibid.*; See para. 29

10 Committee on the Rights of the Child. (2003). General

In its guidelines to states on preparing their periodic reports under the CRC, the Committee seeks “relevant and updated data” on “measures to prohibit and eliminate all forms of harmful traditional practices, including, but not limited to, female genital mutilation and early and forced marriages.”¹¹

In the Supplement to its *Handbook for legislation on violence against women*, on challenging harmful practices, the Division for the Advancement of Women (DAW) emphasises the dangers of unintended consequences of legal reform and “the importance of ensuring that legislation is drafted with all possible risks, backlashes and misuses taken into consideration, and of consistently monitoring the impact of legislation.”¹²

DAW states: “Interventions to address ‘harmful practices’ such as criminalization, may have unintended and negative consequences which result in changes and/or adaptations in ‘harmful practices.’ For example, there is evidence that reforms eliminating exemptions with regard to so-called ‘honour’ crimes have resulted in an increase in incitement of minors to commit the crime as their sentence would be less severe, as well as inciting women to commit suicide so as to avoid punishment. The enactment of legislation banning female genital mutilation has, in some instances, resulted in communities changing from practicing one type of female genital mutilation to another type so

as to avoid punishment, or in lowering the age of girls subjected to female genital mutilation so as to hide the practice from the authorities more easily or to minimize the resistance of the girls themselves [...]”¹³

Given the vulnerability of children, it is obvious that law reform processes to prohibit harmful practices affecting them based on tradition, culture, religion or superstition must be drafted and implemented with full consideration of the best interests of child victims.

The DAW Supplement refers to the involvement of other UN Treaty Bodies in challenging harmful practices. It notes that the International Covenant on Economic, Social and Cultural Rights (ICESCR), adopted in 1966, states in Article 10(2) that marriage must be entered into with the free consent of the intending spouses. In its General Comment No. 14, the Committee on Economic, Social and Cultural Rights notes that States are under a specific legal obligation to adopt effective and appropriate measures to abolish harmful traditional practices affecting the health of children, particularly girls, including early marriage, female genital mutilation, preferential feeding and care of male children. It also notes that States parties are obliged to prevent third parties from coercing women to undergo traditional practices, such as female genital mutilation.¹⁴ The DAW Supplement goes on to quote other Treaty Bodies.¹⁵

Comment No. 4, *Adolescent health and development in the context of the Convention on the Rights of the Child*, CRC/GC/2003/4. Retrieved from <http://tb.ohchr.org/default.aspx?Symbol=CRC/GC/2003/4>

11 Committee on the Rights of the Child. (2010). *Treaty-specific guidelines regarding the form and content of periodic reports to be submitted by States parties under article 44, paragraph 1 (b), of the Convention on the Rights of the Child*. CRC/C/58/Rev.2, para. 34. Retrieved from www2.ohchr.org/english/bodies/crc/docs/CRC.C.58.Rev.2.doc

12 Department of Economic and Social Affairs, Division for the Advancement of Women. (2011). *“Harmful practices” against Women, Supplement to the Handbook for Legislation on Violence against Women*. Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-handbook.htm>

13 *Ibid.*; See page 4.

14 Committee on Economic, Social and Cultural Rights. (2000). General Comment No. 14, *The right to the highest attainable standard of health (article 12 of the International Covenant on Economic, Social and Cultural Rights)*, E/C.12/2000/4, para. 35. Retrieved from <http://daccess-ods.un.org/TMP/5396336.31706238.html>

15 Department of Economic and Social Affairs, Division for the Advancement of Women. (2011). *“Harmful practices” against Women, Supplement to the Handbook for Legislation on Violence against Women*. Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-handbook.htm>

EXPLICIT REFERENCES TO HARMFUL PRACTICES IN HUMAN RIGHTS INSTRUMENTS

The Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women, the African Charter on the Rights and Welfare of the Child, and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa have specific references to harmful practices.

The Convention on the Rights of the Child, in ARTICLE 24(3) (the child's right to health and health services) requires: "States parties shall take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children."

Under ARTICLE 2 of the **Convention on the Elimination of All Forms of Discrimination against Women**: "States Parties condemn discrimination against women in all its forms, agree to pursue by all appropriate means and without delay a policy of eliminating discrimination against women and, to this end, undertake: [...]"

- f. To take all appropriate measures, including legislation, to modify or abolish existing laws, regulations, customs and practices which constitute discrimination against women; [...]."

ARTICLE 5 requires States Parties "to take all appropriate measures:

- a. "To modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices and customary and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women;
- b. To ensure that family education includes a proper understanding of maternity as a social function and the recognition of the common responsibility of men and women in the upbringing and development of their children, it being understood that the interest of the children is the primordial consideration in all cases."

And ARTICLE 16 covers rights relating to marriage, including child marriage; the following provisions are particularly relevant:

- "1. States Parties shall take all appropriate measures to eliminate discrimination against women in all matters relating to marriage and family relations and in

particular shall ensure, on a basis of equality of men and women:

- a. The same right to enter into marriage;
- b. The same right freely to choose a spouse and to enter into marriage only with their free and full consent;
- c. The same rights and responsibilities during marriage and at its dissolution;
- d. The same rights and responsibilities as parents, irrespective of their marital status, in matters relating to their children; in all cases the interests of the children shall be paramount;

[...].

2. The betrothal and the marriage of a child shall have no legal effect, and all necessary action, including legislation, shall be taken to specify a minimum age for marriage and to make the registration of marriages in an official registry compulsory."

The African Charter on the Rights and Welfare of the Child has more detail in its ARTICLE 21:

- "1. States Parties to the present Charter shall take all appropriate measures to eliminate harmful social and cultural practices affecting the welfare, dignity, normal growth and development of the child and in particular:
 - a. those customs and practices prejudicial to the health or life of the child; and
 - b. those customs and practices discriminatory to the child on the grounds of sex or other status.
2. Child marriage and the betrothal of girls and boys shall be prohibited and effective action, including legislation, shall be taken to specify the minimum age of marriage to be 18 years and make registration of all marriages in an official registry compulsory."

The Protocol to the African Charter on Human and Peoples' Rights, on the Rights of Women in Africa, defines "harmful practices" as "all behaviour, attitudes and/or practices which negatively affect the fundamental rights of women and girls, such as their right to life, health, dignity, education and physical integrity;[...]." It requires States Parties to prohibit and condemn all forms of harmful practices that negatively affect the human rights of women, and which are contrary to recognised international standards, and take all necessary legislative and other measures to eliminate them.

PROHIBITION AS A FOUNDATION FOR ELIMINATION

There is limited space in this report to provide a more detailed review of the international human rights framework requiring the prohibition and elimination of harmful practices affecting children.

As a follow-up to the UN Secretary-General's Study on Violence against Women, the Division for the Advancement of Women (now part of UN Women), in collaboration with the United Nations Office on Drugs and Crime (UNODC), organized an expert group meeting on good practices in legislation on violence against women, held in Vienna in May 2008. It developed a model framework for legislation on violence against women. The framework emphasizes the importance of adopting a comprehensive and human rights-based legislative approach to all forms of violence against women that encompasses not only criminalization and the effective prosecution and punishment of perpetrators, but also the prevention of violence, the empowerment, support and protection of survivors, and the creation of mechanisms to ensure effective implementation of the legislation.

Based on the outcome of this meeting, in 2009 DAW prepared a *Handbook for legislation on violence against women*. A further expert meeting was organised by DAW on "Good practices in legislation on 'harmful practices' against women." The introduction to a report of this meeting emphasises: "States are obligated under a comprehensive international legal and policy framework to enact, implement and monitor legislation on all forms of violence against women, including 'harmful cultural or traditional practices' [...]." And in 2011, DAW issued a supplement to its Handbook on "Harmful practices against women."¹⁶

16 Department of Economic and Social Affairs, Division for the Advancement of Women. (2009). *Handbook for Legislation on Violence against Women*. See also also Department of Economic and Social Affairs, Division for the Advancement of Women. (2011). "Harmful practices" against Women, *Supplement to the Handbook for Legislation on Violence against Women*. Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-handbook.htm>

This systematic development of detailed guidance for states on how to legislate to prohibit and eliminate harmful practices against women and girls is of great value. A similar comprehensive exercise is urgently needed and recommended by this report to identify the range of harmful practices affecting children, and the legislative and other measures required to prohibit and eliminate them. Efforts so far have been piecemeal. The disempowered and disenfranchised status of children and the unpopularity of challenging practices defended by tradition, culture, religion or superstition combine to hinder progress.

The DAW Handbook and Supplement provide detailed and relevant summaries of the international and regional legal and policy frameworks. As the Supplement states: "... over the past 60 years, numerous provisions in international legal and policy frameworks have called for legal measures to address 'harmful practices.'"¹⁷

There is unanimity among UN Treaty Bodies and other authorities that there must be prohibition in legislation of all harmful practices. The Committee on the Rights of the Child refers in its General Comment to states' obligation to ensure "absolute prohibition of all forms of violence against children in all settings and effective and appropriate sanctions against perpetrators."¹⁸

The following sections highlight some particular issues in prohibiting harmful practices violating children's rights:

17 *Ibid.*; See in particular *Supplement* Section 2.2, "International legal and policy frameworks and Jurisprudence" and Section 2.3, "Regional legal and policy frameworks," pages 5 and 9. Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-handbook.htm>

18 Committee on the Rights of the Child. (2011). General Comment No. 13, *The right of the child to freedom from all forms of violence*, CRC/C/GC/13, para. 41(d). Retrieved from http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf

IMPACT OF MULTIPLE LEGAL SYSTEMS

Reports and resolutions of the UN General Assembly have addressed situations where “multiple legal systems” exist, emphasising that their provisions must in every case comply with “international human rights obligations, commitments and principles” (for example, GA resolutions 61/143 and 63/155). The International Expert Consultation organised by the Special Representative to the UN Secretary-General on Violence against Children in Addis Ababa in June 2012 focused particularly on the impact of multiple legal systems on the recognition and realization of children’s rights. It must be emphasised that states’ obligations under international and regional instruments which they have ratified, do not permit the existence of systems of law that are not compliant with those instruments. There must be no hesitation in condemning laws or procedures which conflict with international human rights standards. There are positive examples of states that have established the obligation for compliance clearly in their Constitution.¹⁹

The DAW *Handbook for legislation on violence against women* emphasises that legislation should state that:

“where there are conflicts between customary and/or religious law and the formal justice system, the matter should be resolved with respect for the human rights of the survivor and in accordance with gender equality standards; and the processing of a case under customary and/or religious law does not preclude it from being brought before the formal justice system.”²⁰

19 For example, Kenya’s new (2010) Constitution states in Article 2(4) (Supremacy of the Constitution) “Any law, including customary law, that is inconsistent with this Constitution is void to the extent of the inconsistency, and any act or omission in contravention of this Constitution is invalid.” Retrieved from <http://www.kenyaembassy.com/>

20 Department of Economic and Social Affairs, Division for the Advancement of Women. (2009). *Handbook for Legislation on Violence against Women*, page 16. Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-handbook.htm>

“CONSENT” AND HARMFUL PRACTICES AGAINST CHILDREN

Harmful practices based on tradition, culture, religion or superstition are often perpetrated on very young children or infants who lack the capacity to consent or to refuse consent for them. Assumptions of parental powers or rights over their children allow the perpetration of a wide range of these practices, some by parents directly, some by other individuals with parents’ assumed or actual consent.

It is essential for parents to be able to give consent to positive health interventions, including surgical interventions, and other treatment on behalf of children who lack the capacity to consent or withhold consent for themselves. But it is incompatible with children’s rights to allow such parental powers to extend to authorising or perpetrating practices such as those listed in Section 4, whether or not supported by parents’ culture, tradition, or religious or other belief. In a large majority of states, traditional parental “rights” still justify corporal punishment and other cruel or degrading forms of punishment of children, identified by the Committee on the Rights of the Child as harmful practices. In these states, national law, both written and also common (case) law, provide justifications or defences (“reasonable” punishment, lawful correction, etc). In many states, these defences extend to others “in loco parentis” and/or the law additionally authorises violent punishment of children in schools, forms of alternative care and penal systems for young people. Prohibiting these harmful practices requires the explicit removal of all such defences or justifications.

The persisting legality of such forms of violence, in contrast to the general criminalisation of any assault under states’ criminal codes, is symptomatic of children’s low status in many societies and across all regions as possessions rather than individuals and rights-holders. The CRC favours the replacement of the

concept of parental “rights” over children with that of parental responsibilities, with the best interests of the child as parents’ “basic concern” (Article 18).

Where there is any doubt, law reform should include explicit confirmation that there is no parental right to consent to harmful practices on behalf of their children and no defence or justification for them in written, or any other, law.

CHILDREN’S INDEPENDENT RIGHT TO RELIGIOUS FREEDOM

Section 4 of this report details some harmful practices based on, or believed to be based on, religion. Analysis of these and the development of legislation and other measures to effectively prohibit and eliminate them must take account of the child’s independent right to freedom of religion, upheld in the CRC.

The core human rights instruments uphold every individual’s right to freedom of religious belief, and the CRC (Article 14) upholds the child’s right to freedom of thought, conscience and religion. The Article allows parents to provide direction to the child in exercising their rights “in a manner consistent with the evolving capacities of the child.”

Freedom to manifest one’s religion or beliefs may be subject only to such limitations as are prescribed by law and are necessary to protect public safety, order, health or morals, or the fundamental rights and freedoms of others. Thus, parents and others cannot quote their adult religious beliefs to justify perpetrating harmful practices on children, which violate the child’s rights, without the child’s informed consent.

OTHER CONSIDERATIONS IN PROHIBITING HARMFUL PRACTICES VIOLATING CHILDREN’S RIGHTS

Harmful practices involving direct physical violence against children will be offences under the criminal law on assault, including the law on murder/

manslaughter where death results, provided any existing defences or justifications or provisions allowing parents or others to consent to them (see above) have been removed from the law.

Where separate crimes of “infanticide” and similar exist in national laws, and carry lesser sentences than murder, they are discriminatory, implying that the child killed is of less worth than an adult victim of killing. While it is not our wish to promote excessively punitive responses to crimes against children, it is essential that any such discrimination, reflecting a lower status of the child victim, should be removed.

Some harmful practices based on tradition, culture, religion or superstition require specific identification and prohibition. One example is the grotesque practice of branding children as witches or possessed of evil spirits. This practice appears to be on the increase in parts of Africa and also, through migration, in other regions. The branding of the child in itself is deeply harmful and must be identified as a criminal offence, whether or not it is followed by further direct violence or neglect.

Some harmful practices involve discriminatory and deliberate neglect, rather than active violence. Children’s law in many states already recognises deliberate neglect as an offence and such laws should be adopted and, where necessary, extended to ensure they cover harmful practices affecting particular individual children or groups of children.

Once specific harmful practices are identified, careful review of the relevant existing law(s) and its interpretation is required. This needs to determine whether the harmful practice is clearly unlawful and whether the prohibition can be effectively enforced without further addition to, or amendment of, the law. If there is any confusion, or impediments to enforcement, then the necessary changes to legislation should be identified and advocated until adopted.

ARTICLE 3 (BEST INTERESTS OF THE CHILD)

The Committee emphasizes that the interpretation of a child's best interests must be consistent with the whole Convention, including the obligation to protect children from all forms of violence. It cannot be used to justify practices, including corporal punishment and other forms of cruel or degrading punishment, which conflict with the child's human dignity and right to physical integrity.

An adult's judgment of a child's best interests cannot override the obligation to respect all the child's rights under the Convention. In particular, the Committee maintains that the best interests of the child are best served through:

- Prevention of all forms of violence and the promotion of positive child-rearing, emphasizing the need for a focus on primary prevention in national coordinating frameworks;
- Adequate investment in human, financial and technical resources dedicated to the implementation of a child rights-based and integrated child protection and support system. (para. 61)

Committee on the Rights of the Child, General Comment No. 13, 2011

ENFORCEMENT OF PROHIBITION WHERE PARENTS ARE THE PERPETRATORS

While there should be no impunity for the perpetrators of harmful practices against children, the preventive function of law needs to be emphasised. Given that parents are often involved directly or indirectly in the perpetration of the harmful practices highlighted in this report, the criminal law must be enforced in a way that is sensitive to the special nature of family relationships and children's dependence on their parents and family. Formal interventions, including

prosecution of parents or removal of child victims or perpetrators should only be pursued when assessed as necessary to protect a child from significant harm and to be in the best interests of the child. The Committee on the Rights of the Child provides detailed guidance to states on how the law prohibiting violent punishment, identified as a harmful practice, should be implemented "in the best interests" of the child, in its General Comment No. 8.²¹ This advice is equally applicable to the enforcement of the prohibition of other harmful practices against children.

BUILDING ON PROHIBITION – OTHER MEASURES

It is obvious that law reform to prohibit harmful practices, while an essential foundation required by human rights, will not in isolation lead to the changes in attitude required to eliminate practices, which remain strongly supported by adults close to the child in their family and community. But in addition to recognition of the human rights obligations to prohibit these practices, the power of law as an instrument for social change, for the prevention of crime, including crimes against children, must be recognised.

A wide range of other measures, primarily educational, will be required to accompany law reform. Our recommendations (Section 5) propose some in outline. The International NGO Council believes that evaluation and dissemination is required of the various measures that are being, or have been, used effectively to challenge and to end the active or passive condoning of these harmful practices against children.

21 Committee on the Rights of the Child. (2007). General Comment No. 8, *The right of the child to protection from corporal punishment and other cruel or degrading forms of punishment*, CRC/C/GC/8, see in particular paras. 30 et seq. Retrieved from <http://www.unhcr.ch/tbs/doc.nsf/%28Symbol%29CRC.C.GC.8.En?OpenDocument>

EXAMPLES OF HARMFUL PRACTICES



Snehlata (in glasses) explains the harmful effects of child marriage to women in Agolai Village, Jodhpur District, Rajasthan State (India). Two girls (seated in foreground) are dressed as a groom and bride to help illustrate a point. Ms. Lata is a 'precheta', a community educator and women's advocate. © UNICEF/NYHQ2009-2242/Anita Khemka

4. Examples of harmful practices affecting children based on tradition, culture, religion or superstition

"I was 12 years old when I got married. I was a child. They oppressed me by marrying me. All that I'm good for is to be a mother and a home maker... I'm illiterate. They didn't teach us anything. If they did, at least I would have benefited from something. I didn't know anything about marriage, how to be a mother...I wasn't thinking about anything. I get upset at myself. I get upset at my father. I get upset from my husband. I have constant headaches and I don't feel like even speaking. I feel like someone is choking me. There's so much heaviness on my chest." (Fathiya L., Yemen)²²

This is an initial attempt to list the harmful practices based on tradition, culture, religion or superstition that are affecting children across the world.

Information on each practice is provided, including how and where it is practiced, by whom, the apparent motivation and examples of measures that have been taken to combat it. Inevitably there are gaps, inaccuracies and insufficient information, not least because these practices are frequently defended as being normal and necessary for the protection of the victim or community, and thus often are not documented or even recognised as violations of rights.

Because of the extensive overlap between categories, it is not possible to organise the list under headings (cultural, religious, etc.) or under the rights violated. They are therefore simply listed by key word in alphabetical order. Connections between practices are identified, for example the various harmful practices identified as so-called "honour" crimes.

ACID VIOLENCE

Acid violence involves intentional violence in which perpetrators throw, spray, or pour acid onto the victims' faces and bodies.²³ While acid assaults are sometimes perpetrated by criminal gangs or as a result of mental illness, there is a tradition particularly in South Asian communities of acid attacks on girls and women who transgress behaviour norms, for example by refusing a marriage proposal or sexual advance or for disputes within their marriage or household. Most of the victims are under the age of 25. A recent study from Bangladesh estimated that 60% of victims were between the ages of 10 and 19.²⁴

22 Human Rights Watch. (2010). Yemen: "How Come You Allow Little Girls to Get Married?"

23 The Avon Global Center for Women and Justice at Cornell Law School, the Committee on International Human Rights of the New York City Bar Association, the Cornell Law School International Human Rights Clinic, and the Virtue Foundation. (2011). *Combating Acid Violence in Bangladesh, India, and Cambodia*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/AvonGlobalCenterforWomenandJustice.pdf

24 *Ibid.*

The aim of the perpetrators is not to kill, but to punish the girls by causing disfigurement and physical and mental pain or to punish her family by these acts. Many community members believe that a disfigured victim must have deserved the attack, so the victims also become outcasts. Fear of the practice inevitably represses girls' and women's willingness to challenge established norms.²⁵

BINDING OF NEWBORNS AND INFANTS

The binding or swaddling of infants, wrapping them in cloth so that their movement is restricted, is an age-old and once very widespread harmful practice still persisting in some countries – for example, Turkey, Russia and CIS states. While there is some evidence that infants may be soothed by firm wrapping of their limbs, tight swaddling carries risk of hypothermia, respiratory problems, hip dysplasia and low weight-gain.²⁶

In Tajikistan, a still common harmful traditional childcare practice involves binding infants in cradles, over a drain hole for urine and faeces, with the child entirely immobilised except for the head. When the child cries, the cradle is rocked. The age of these infants range from two months to 20 months and they typically spend 20 or more hours per day in the cradle. This harmful practice can significantly delay development and cause physical impairment.²⁷

25 *Ibid.*

26 See e.g. Bystrova, Ksenia; Widström, Ann-Marie; Matthiesen, Ann-Sofi; Ransjö-Arvidson, Anna-Berit; Welles-Nyström; Barbara, Vorontsov, Igor; Uvnäs-Moberg, Kerstin. (2007 a). "The effect of Russian Maternity Home routines on breastfeeding and neonatal weight loss with special reference to swaddling." *Early Human Development*, Jan; 83 (1): 29-39. Retrieved from <http://www.ncbi.nlm.nih.gov/pubmed/16716541>

27 Save the Children. (2011). *Harmful Traditional Practices in Tajikistan*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/SaveTheChildren.pdf

BIRTH SUPERSTITIONS

A range of rights violations, including murder, abandonment and violence, stem from superstitious belief that certain types of birth are unlucky or bring evil spirits to the family or community. The superstitions vary among different ethnic groups and cultures and subsets within them. The types of birth identified include:²⁸

- Multiple births: giving birth to twins or more than one child at once.
- Birth order and sex of child: having a boy child after several girls, or a girl child after several boys.
- Premature births: infants born early, sometimes in specific months, such as the eighth month.
- "Fast" or "quick" births: infants who come out of the birthing canal very quickly.
- Unusual birth position of the infant during labour.

Such children may be abandoned or killed at birth.²⁹ They may be accused of witchcraft, ostracized and maltreated by their families and communities. For example, the Committee on the Rights of the Child, in its Concluding Observations following examination of Madagascar's second periodic report in 2003, stated: "The Committee notes that the murder or rejection of children thought to be 'born on an unlucky day' is beginning to disappear, but remains deeply concerned that such murders still occur and at the rejection or abandonment of twins in the Mananjary region."³⁰

28 Kafunda, E.M. (2012). *Esquisse sur des pratiques traditionnelles nefastes affectant les droits de l'enfant en republique demoncrtique du congo*. Unpublished submission to the International NGO Council on Violence against Children from NGO CATSR, DRC. See also UNICEF WCARO. (2010). *Children Accused of Witchcraft: An Anthropological Study of Contemporary Practices in Africa*. Retrieved from <http://www.unhcr.org/refworld/docid/4e97f5902.html>

29 UNICEF WCARO. (2010). *Children Accused of Witchcraft: An Anthropological Study of Contemporary Practices in Africa*. Retrieved from <http://www.unhcr.org/refworld/docid/4e97f5902.html>

30 Committee on the Rights of the Child (2003). Concluding Observations: Madagascar, CRC/C/15/Add.218. Retrieved from <http://www.unhchr.ch/tbs/doc.nsf/%28Symbol%29/CRC.C.15.Add.218.En?Opendocument>

BLOOD-LETTING

Blood-letting is a centuries-old and previously widespread harmful medical practice based on the false idea that removing blood from the body is a cure for many diseases and promotes good health. It is still practiced on children in parts of the world in the belief that allowing “bad” blood to escape through a cut or puncture to scalp or arms will cure a range of diseases, including elephantiasis, rheumatism and meningitis, and is an appropriate remedy for high fever and headache. Blood-letting can result in severe bleeding, anaemia, infection, contraction of STIs, and death.³¹

For example in Ethiopia, blood-letting is still commonly practiced by communities despite reporting high rates of understanding that it is harmful.³² In Tajikistan, “kolak” is a practice where small cuts are made on the roof of the mouth, back, chest or stomach of newborns and infants in order to release bad or dirty blood. This usually occurs when the infant cries a lot, has difficulty breastfeeding or their skin or lips turns a darker shade. The practice may be repeated three to four times a week.³³

BREAST FLATTENING

Breast flattening, also known as breast ironing or breast massage, is practiced in West and Central Africa as a way to remove signs of puberty. The apparent motivation is to protect girls from early pregnancy or potential sexual advances and assault. The breasts are pounded, pressed, or massaged with an object

that has often been heated.³⁴ Usually, the mother or a family member carries out this practice in the belief they are acting in the girl’s best interests. The long-term physical and psychological side effects are undocumented but short-term effects include tissue damage, pain, burns, irritation, infection, scarring, depression and shame, among others.³⁵

MALE CIRCUMCISION

Male circumcision has been largely neglected in mainstream debates on harmful practices because of its strong religious connections, particularly with Judaism and Islam, and its general acceptance in many societies. In some areas, it is also a cultural practice, for example in parts of South Africa and in Zambia among some ethnic groups, where it is associated with rituals initiating boys to adulthood.³⁶

A global review of neonatal and child male circumcision by the World Health Organization (WHO) and UNAIDS, published in 2010, describes it as one of the oldest and most common surgical procedures and estimates that one in three adult males are circumcised, with almost universal coverage in some areas.³⁷ A high

31 Jeppsson, A., Tesfu, M., & Persson, L. (2003). “Health Care Providers’ Perceptions on Harmful Traditional Health Practices in Ethiopia.” *Ethiopian Journal of Health Development*, 17(1):35-44. Retrieved from <http://www.ajol.info/index.php/ejhd/article/view/9780>

32 Lelieveld, M. (2011). *Child Protection in the Somali Region of Ethiopia*. Retrieved from <http://www.savethechildren.org.uk/resources/online-library/child-protection-somali-region-ethiopia-report-bridges-project>

33 Save the Children. (2011). *Harmful Traditional Practices in Tajikistan*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/SavetheChildren.pdf

34 Plan International. (2011). *General Comment/General Recommendation on Harmful Practices*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/PlanInternational.pdf

35 Gender Empowerment and Development. (2011). *Breast Ironing: A Harmful Traditional Practice in Cameroon*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/GenderEmpowermentandDevelopment.pdf

36 Le Roux, L. (2006). *Harmful Traditional Practices, (Male Circumcision and Virginity Testing of Girls) and the Legal Rights of Children*. Masters’ Thesis, Unpublished. Retrieved from <http://www.openthesis.org/documents/Harmful-traditional-practices-male-circumcision-502420.html>; CDC. (2012). “Neonatal Herpes Simplex Virus Infection Following Jewish Ritual Circumcisions that Included Direct Orogenital Suction — New York City, 2000–2011.” *Morbidity and Mortality Weekly Report*, 6(22), 405–409. Retrieved from http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6122a2.htm?s_cid=mm6122a2_w

37 WHO and UNAIDS. (2010). *Neonatal and child male circumcision: a global review*. Retrieved from http://www.who.int/hiv/pub/malecircumcision/neonatal_mc/en/index.html

proportion of circumcisions are carried out on neonates and very young children with no capacity to consent for themselves. It is almost universal in much of the Middle East, North and West Africa and Central Asia and is common in other countries, including Australia, Bangladesh, Canada, Indonesia, Pakistan, the Philippines, the Republic of Korea, Turkey and the United States. It is also prevalent among certain ethnic groups in central, eastern and southern Africa. According to this review, in some settings such as North Africa, Pakistan, Indonesia, Israel and rural Turkey, the majority of providers are not medically trained. In contrast, circumcision is provided almost exclusively by medically trained personnel in Saudi Arabia and other Gulf States, as well as in Egypt, the Republic of Korea and the United States. Circumcision tends to be practised shortly after birth in parts of West Africa, Israel, the Gulf States and the United States. In contrast, in North Africa, the Middle East and parts of Asia males are circumcised as young boys, and in some regions of east and southern Africa, as adolescents or young adults.

Until recently, male circumcision has generally been challenged only when carried out by non-medical personnel in unhygienic settings without pain relief. But a children's rights analysis suggests that non-consensual, non-therapeutic circumcision of boys, whatever the circumstances, constitutes a gross violation of their rights, including the right to physical integrity, to freedom of thought and religion and to protection from physical and mental violence. When extreme complications arise, it may violate the right to life. It is reported that male circumcision can result in numerous physical, psychological, and sexual health problems during the surgery, afterwards, and throughout adulthood, including haemorrhage, panic attacks, erectile dysfunction, infection (in severe forms leading to partial or complete loss of the penis), urinary infections, necrosis, permanent injury or loss of the glans, excessive penile skin loss, external deformity, and in some cases even death.³⁸

38 Nyaundi, P.M. (2005). "Circumcision and the rights of the

There are now substantial established campaigns against non-therapeutic, non-consensual circumcision of boys and growing support to end it, particularly within the medical community. For example, the Royal Dutch Medical Association (KNMG) has publicly taken a children's rights position that: "children must not be subjected to medical proceedings that have no therapeutic or preventative value."³⁹ In addition, in 2011 the then Ombudsman for Children in Norway advocated that boys should not be circumcised for non-therapeutic reasons until they are old enough to give their informed consent and that parents should not be able to consent on behalf of their children.⁴⁰ Most recently, in 2012 a German court ruled that male circumcision constitutes a violation of physical integrity as a child is "permanently and irreparably changed by the circumcision" and that the practice is also in conflict with the child's right to religious freedom.⁴¹

The WHO review quoted three randomized controlled trials suggesting that circumcision reduces the risk of acquiring HIV infection in males. But this potential health benefit does not over-ride a child's right to give informed consent to the practice. The decision to undertake circumcision for these reasons can be deferred to a time where the risk is relevant and the child is old enough to choose and consent for himself.⁴²

Kenyan boy-child." *African Human Rights Law Journal*, 5, 171-181. Retrieved from <http://www.chr.up.ac.za/index.php/ahrlj-contents/volume-5-no-1-2005.html>

39 The Royal Dutch Medical Association (KNMG). (2010). *Non-therapeutic circumcision of male minors*. Retrieved from <http://knmg.artsennet.nl/Publicaties/KNMGpublicatie/Nontherapeutic-circumcision-of-male-minors-2010.htm>

40 The Ombudsman For Children In Norway. (2011). *Consultative Response on Ritual Male Circumcision*.

41 "German circumcision ban: Is it a parent's right to choose?" *BBC News*, 12 July 2012, Retrieved from <http://www.bbc.co.uk/news/magazine-18793842>

42 The Royal Dutch Medical Association (KNMG). (2010). *Non-therapeutic circumcision of male minors*. Retrieved from <http://knmg.artsennet.nl/Publicaties/KNMGpublicatie/Nontherapeutic-circumcision-of-male-minors-2010.htm>

CORPORAL PUNISHMENT

Corporal or physical punishment and other cruel or degrading forms of punishment are the most common forms of violence experienced by children, identified as an obvious violation of their rights and as a harmful practice by the Committee on the Rights of the Child and other international and regional human rights monitoring bodies. A recent major UNICEF study in more than 30 states found that on average, 75 per cent of children experienced physical punishment and/or psychological aggression in their homes. On average, 17 per cent of children were subjected to severe punishment.⁴³

Violent punishment takes many forms. The Committee on the Rights of the Child provides a descriptive definition in its General Comment No. 8: "The Committee defines 'corporal' or 'physical' punishment as any punishment in which physical force is used and intended to cause some degree of pain or discomfort, however light. Most involves hitting ('smacking', 'slapping', 'spanking') children, with the hand or with an implement - a whip, stick, belt, shoe, wooden spoon, etc. But it can also involve, for example, kicking, shaking or throwing children, scratching, pinching, biting, pulling hair or boxing ears, forcing children to stay in uncomfortable positions, burning, scalding or forced ingestion (for example, washing children's mouths out with soap or forcing them to swallow hot spices). In the view of the Committee, corporal punishment is invariably degrading. In addition, there are other non-physical forms of punishment that are also cruel and degrading and thus incompatible with the Convention. These include, for example, punishment which belittles, humiliates, denigrates, scapegoats, threatens, scares or ridicules the child."⁴⁴

43 UNICEF. (2010). *Child Disciplinary Practices at Home: Evidence from a Range of Low- and Middle-Income Countries*. Retrieved from www.childinfo.org/files/report_Disipl_FIN.pdf See also Global Initiative to End All Corporal Punishment of Children, www.endcorporalpunishment.org, for other studies from developed countries showing similar rates.

44 Committee on the Rights of the Child, General Comment No.

Corporal punishment is a long-standing and pervasive practice, still socially approved and lawful in the home and family in a large majority of states. In some cases it is supported by religious belief, although influential leaders of all the major religions have called for its prohibition and elimination.⁴⁵ In some states, extreme forms of physical punishment, including amputation and stoning, are justified under Sharia law.

Corporal punishment occurs in all settings of children's lives. It is legally sanctioned in some settings in the majority of states worldwide, and in all settings in 26 states. Judicial sentences of corporal punishment for children, including caning, flogging and amputation, are lawful in 41 states. Corporal punishment is lawful in schools in 80 states and in group care settings such as orphanages in 146 states. In 165 states, violent punishment of children is legally sanctioned in their own homes.

But globally, the pace of reform is increasing, with 33 states prohibiting corporal punishment in all settings including the home as of September 2012. The number of states prohibiting corporal punishment of children in all settings has tripled since 2000, when children had full protection in only 11 states, and has more than doubled since 2006 (16 states).⁴⁶

Corporal punishment kills thousands of children every year, and seriously injures and maims many more. The serious impact of this and other non-physical forms of violent punishment on the development and health, including mental health, of children is well researched.⁴⁷

8, 2006, CRC/C/GC/8, Retrieved from <http://www.unhchr.ch/tbs/doc.nsf/%28Symbol%29/CRC.C.GC.8.En?OpenDocument>

45 See <http://www.churchesfornon-violence.org/>

46 For full details, see Global Initiative to End All Corporal Punishment of Children www.endcorporalpunishment.org.

47 For a summary and references see Global Initiative submission to the Office of the High Commissioner for Human Rights study on the child's right to health, <http://www.ohchr.org/Documents/Issues/Children/Study/RightHealth/GIEACPC>.

COSMETIC MUTILATION

Various practices are carried out in the belief that they enhance beauty. Two examples are:

- **Neck rings/neck stretching:** To elongate the neck, heavy metal rings are placed around the neck of girls, continuously at timed intervals, until adulthood or marriage. This practice is done by custom in the belief that it enhances beauty and/or wealth. The appearance of a stretched neck is an illusion. In reality, the weight of the rings alters the growth of the ribs, shoulders, and clavicles. This practice is most common in Asia and southern Africa.⁴⁸
- **Lip plates:** In certain countries, including parts of Ethiopia and Brazil, in order to highlight a girl's beauty or to scare enemies, cuts are made in the lips, and sometimes ears, of young girls and a plate of variable size is inserted. In Ethiopia, the cuts are often accompanied by the extraction of the front teeth. Gradually, larger plates are inserted to stretch the lip to the desired size and shape. Women may remove the plates as needed but generally are required to wear them in public or in the presence of their husbands or children.⁴⁹ This practice can have negative effects on the health of the child including infection and malnutrition.⁵⁰

CURSING

Belief in witchcraft or "Juju" in Africa is used to coerce children to submit to trafficking and sexual

exploitation through cursing rituals. The child victims are made to take oaths of allegiance to deities and spirits who will find and exact terrible retribution if the child attempts to escape or resist the abuse. It is a highly effective instrument of control. Because of their fear, children who are rescued may return to the traffickers or refuse to cooperate in their prosecution.

DOWRY AND BRIDE PRICE

Dowry or bride price is a system where money, goods, or services – such as labour – are exchanged between two families for a bride. A bride's family pays a dowry and the groom's family pays a bride price. The bride price system is common in Africa and the dowry system in South Asia.

Girls are treated as commercial objects and boys from poor backgrounds face the possibility of never having a family. Impoverished parents may marry off their young daughters too early.⁵¹ Because a premium is put on virginity and female genital mutilation, girls may be exposed to virginity testing and painful mutilations to exact a high bride price.

Dowries perpetuate the notion that girls are economic burdens to be rid of. Like bride prices, dowry demands are lower for girls who are younger and perceived to be of greater value.⁵² Families may struggle to meet dowry demands, and husbands

pdf; also see NGO Advisory Council for Follow-Up to the UN Study on Violence Against Children. (2011). *Five Years On: A Global Update on Violence Against Children*. Retrieved from http://www.crin.org/docs/Five_Years_On.pdf

48 Institut International Des Droits De L Enfant. (2010). *Children Victim of Harmful Traditional Practices*. Retrieved from http://www.childsrights.org/html/site_en/index.php?c=themes_pres

49 *Ibid*.

50 Kouyate, M. (2009). *Harmful Traditional Practices Against Women and Legislation*. United Nations Expert Group Meeting Paper. (EGM/GPLHP/2009/EP 07). Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-egms-gplahpaw.htm>

51 International Center for Research on Women (ICRW). (2007). *New Insights on Preventing Child Marriage - A Global Analysis of Factors and Programs*. Retrieved from <http://www.icrw.org/publications/new-insights-preventing-child-marriage>

52 Avon Global Center for Women and Justice at Cornell Law School, the Committee on International Human Rights of the New York City Bar Association, the Cornell Law School International Human Rights Clinic, and the Virtue Foundation. (2011). *Combating acid violence in Bangladesh, India, and Cambodia*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/Avon-GlobalCenterforWomenandJustice.pdf. See also World Vision. (2008). *Before She's Ready: 15 Places Girls Marry by 15*. Retrieved from <http://www.worldvision.org/content.nsf/about/press-development-girls-early-marriage>

Jacqueline, 7, holds a cooking pot in Acra, a displacement camp for quake victims in the Juvenat neighbourhood of Port-au-Prince, the capital. Jacqueline is a 'restavek', a child given by impoverished parents to relatives or unknown families in the hope that she will have a better life. She lives with a woman she calls her 'aunt'. Jacqueline does dishes and cleans house, but does not go to school or own any toys. Many restaveks become domestic servants, are subjected to violence or abuse, and are kept out of school. ©UNICEF/NYHQ2010-2563/Roger LeMoyne



and their families may also increase dowry demands after marriage. In some communities in India, younger daughters are sent to work to earn money to pay an elder sister's dowry, putting them at risk of violence and abuse.⁵³ Unmet dowry demands can result in husbands and their families exacting revenge on the girl through severe physical and mental violence and torture, including starvation, rape, burning, and acid attacks.⁵⁴

53 World Vision Australia. (2007). *Letting the Future In: World Vision and Child Labour in India*. Retrieved from <http://wvasiapacific.org/publications/children-in-crisis/letting-the-future-in-child-labour-in-india.html>

54 OHCHR. (1995). *Fact Sheet No. 23: Harmful Traditional Practices Affecting the Health of Women and Children*. Retrieved from www.ohchr.org/Documents/Publications/FactSheet23en.pdf

The payment of a dowry has been prohibited in India under the 1961 Dowry Prohibition Act in civil law and subsequently by Sections 304B and 498a of the Indian Penal Code (IPC). So many women were dying as a result of dowry demands before the crime of causing a "dowry death" was introduced in criminal law.⁵⁵ Recent reports indicate that the Ministry of Women and Child Development is seeking life-term sentences for those convicted in dowry death cases.⁵⁶

55 Section 304B of the Indian Penal Code, See <http://sgdatabase.unwomen.org/searchDetail.action?measureId=10337>

56 "Govt plans life term for dowry death convicts," The Times of India, 1 September 2012. Retrieved from <http://timesofindia.indiatimes.com/india/Govt-plans-life-term-for-dowry-death-convicts/articleshow/16098210.cms>

In Bangladesh, The Dowry Prohibition Act (1980) provides that payment or demand for payment of a dowry is punishable with up to five years imprisonment and/or payment of a fine. The law was amended in 1983, 1995 and 2000 to provide for life imprisonment or a sentence of death as well as payment of fines in cases where a husband or any of his relatives causes or attempts to cause death or grievous injury to his wife related to dowry.⁵⁷ In Pakistan and Nepal, dowries are limited but nonetheless the practice is widespread across the sub-continent, blighting the lives and prospects of millions of girls.

EYELID INCISIONS

Common in parts of Africa, such as Ethiopia, incisions are made in eyelids, often using a razor blade, to treat eye infection and diseases. This practice frequently results in excessive bleeding, secondary infections and scarring.⁵⁸ Incisions on many other parts of the body are common in traditional healing practices in Zambia. Traditional medicine is rubbed in the wounds made by the incisions, which may, apart from infections, result in abscesses or maiming.

FEMALE GENITAL MUTILATION

Female genital mutilation (FGM) is probably the most widely recognized and addressed of these harmful practices. The WHO defines FGM as comprising "all procedures undertaken that involve the partial or full removal of the external female genitalia or other injury to the female genital organs for non-medical

reasons."⁵⁹ FGM is classified into four major types, depending on degree and severity: i) clitoridectomy, ii) excision, iii) infibulation, and iv) other.⁶⁰ Its practice violates numerous human rights, including the right to health and the right to protection from all forms of violence. FGM has repeatedly been pronounced a form of torture, violating a child's right to protection from torture and cruel, inhuman or degrading treatment.⁶¹

The global prevalence of FGM is estimated at 140 million girls and women worldwide, most of whom underwent the procedure before reaching the age of 15.⁶² Traditionally, FGM is reportedly practiced amongst communities and ethnic groups in Africa, the Middle East, and South Asia. In some communities, almost all girls and women undergo the procedure. Prevalence as high as 97.3% has been reported in one region in Ethiopia,⁶³ and in another, pastoralist region, 91% of women have reportedly undergone the most severe forms of FGM.⁶⁴ Both these rates are much higher than the national average of 74%, underscoring that the

57 Bangladesh Dowry Prohibition Act 1980, See <http://sgdatabase.unwomen.org/searchDetail.action?measureId=41163&baseHREF=country&baseHREFId=192> ; See also Organisation Mondiale Contre la Torture (OMCT). (2003). *Violence against Girls in Bangladesh, A Report to the Committee on the Rights of the Child*. Retrieved from www.omct.org/files/2004/07/2409/eng_2003_01_bangladesh.pdf

58 Jeppsson, A., Tesfu, M., & Persson, L. (2003). "Health Care Providers' Perceptions on Harmful Traditional Health Practices in Ethiopia." *Ethiopian Journal of Health Development*, 17 (1): 35-44. Retrieved from <http://www.ajol.info/index.php/ejhd/article/view/9780>

59 WHO. (2012). Fact Sheet No. 241, *Female genital mutilation*. Retrieved from <http://www.who.int/mediacentre/factsheets/fs241/en/index.html#>

60 For full definitions of each type, see the WHO Fact Sheet: <http://www.who.int/mediacentre/factsheets/fs241/en/index.html#>

61 UN Human Rights Council, Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, Nowak Manfred. (2008). *Promotion and protection of all human rights, civil, political, economic, social and cultural rights, including the right to development*, (A/HRC/7/3). Retrieved from <http://daccess-ods.un.org/TMP/8919442.29602814.html>

62 WHO. (2012). Fact Sheet No. 241, *Female genital mutilation*. Retrieved from <http://www.who.int/mediacentre/factsheets/fs241/en/index.html#>

63 Minority Rights Group International. (2008). *A Double Bind: The Exclusion of Pastoralist Women in the East and Horn of Africa*. Retrieved from <http://www.minorityrights.org/75871/reports/a-double-bind-the-exclusion-of-pastoralist-women-in-the-east-and-horn-of-africa.html>

64 UNICEF. (2007). *Female Genital Mutilation/Cutting in Ethiopia*. Retrieved from http://www.unicef.org/ethiopia/ET_fgm.pdf

practice varies between regions, cultures, and ethnic groups, even within a single country or community.⁶⁵

The reasons for the practice of FGM vary considerably though are most often associated with making a girl “suitable” to be married; a belief that it is “cleaner” and can increase fertility; for notions of aesthetics or beauty; or notions of “honour” to control sexuality rooted in the belief that a girl that is excised will remain a virgin until marriage and loyal afterward as her sexual desire will be decreased.⁶⁶ FGM is often undertaken, in particular by family members, in the belief that it will lead to a better life and inclusion in society for girls. Even in instances where parents or family are against the practice, pressures from the community and outside members can be great.⁶⁷

In addition, possibly as a result of growing awareness of its health consequences, in some states health-care providers are increasingly agreeing to perform the procedure, in the hope that it will reduce the risk of various complications. The WHO reported on a recent analysis of existing data showing that more than 18% of all girls and women subjected to FGM in the countries from which data are available had the procedure performed on them by a health-care provider (varying from less than 1% in some countries to over 70% in one country).⁶⁸

However, FGM can result in major threats to health in the short-term and long-term, including increased risk of disease transmission, fistulas, increased complications and difficulty during childbirth, including haemorrhaging, shock, sepsis, and death to both the mother and child. One study undertaken in six African countries by WHO found that incidence of both maternal and infant deaths were higher in women that had undergone FGM, and that these death rates increased as the severity of the classification of FGM increased.⁶⁹ Death can also result from complications as the procedure itself goes awry.

Although it is widely believed, especially by many practicing communities, that FGM is a religious practice and tradition, the practice of FGM pre-dates both Christianity and Islam. None of the holy texts of Christianity, Judaism, or Islam requires or prescribes the practice and many religious scholars have spoken publicly against this belief.⁷⁰ For example, a conference of scholars took place in November 2006 at Al-Azhar University in Cairo. Initiated by TARGET, a German human rights organisation, it was held under the auspices of the Grand Mufti of Egypt, and brought together Muslim scholars from all over the world to discuss the practice of FGM with scientists. They passed a resolution, with all the weight of a fatwa, that FGM was to be considered a punishable offence, as an act of aggression, and a crime against humanity.⁷¹ A sub-

65 UNICEF. (2012). *The State of the World's Children 2012: Children in an Urban World*. Table 9: Child Protection. Retrieved from <http://www.unicef.org/sowc2012/statistics.php>

66 Ras-Work, Berhane. (2009). *Legislation to Address the Issue of Female Genital Mutilation (FGM)*. (EGM/GPLHP/2009/EP.01). Retrieved from http://www.un.org/womenwatch/daw/egm/vaw_legislation_2009/Expert%20Paper%20EGMGPLHP%20_Berhane%20Ras-Work%20revised.pdf; WHO. (2008). *Eliminating Female Genital Mutilation: An Interagency Statement UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCHR, UNHCR, UNICEF, UNIFEM, WHO*. Retrieved from <http://www.who.int/reproductivehealth/publications/fgm/9789241596442/en/index.html>

67 World Vision. (2008). *Before She's Ready: 15 Places Girls Marry by 15*. Retrieved from <http://www.worldvision.org/content.nsf/about/press-development-girls-early-marriage>

68 WHO. (2010). *Global strategy to stop health-care providers*

from performing female genital mutilation UNFPA, UNHCR, UNICEF, UNIFEM, WHO, FIGO, ICN, MWIA, WCPA, WMA. Retrieved from http://www.who.int/reproductivehealth/publications/fgm/rhr_10_9/en/index.html

69 WHO Study Group on Female Genital Mutilation and Obstetric Outcome, (2006). “Female genital mutilation and obstetric outcome: WHO collaborative prospective study in six African countries.” *The Lancet*, Volume 367, Issue 9525:1835–1841. Retrieved from <http://www.thelancet.com/journals/lancet/article/PIIS0140673606688053/abstract>

70 WHO. (2008). *Eliminating Female Genital Mutilation: An Interagency Statement UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCHR, UNHCR, UNICEF, UNIFEM, WHO*. Retrieved from <http://www.who.int/reproductivehealth/publications/fgm/9789241596442/en/index.html>

71 Deutsche Gesellschaft für Internationale Zusammenar-

regional Fatwa based in Mauritania, Senegal, Mali and Guinea Bissau called for a definitive abandonment of FGM in Africa.⁷² Participants at a symposium in Banjul in the Gambia organised by the Inter-African Committee on Traditional Practices confirmed that FGM does not have Islamic nor Christian origin or justifications.⁷³

FGM has become a global practice as the groups and communities approving it migrate to all regions and continue the practice. In Europe, North America and Australia, FGM is reportedly being practiced in increasing numbers, requiring measures not only to make the practice of FGM a crime but also to prevent girls being taken out of the country in order to mutilate them.

Given the absence of religious mandate, the extreme pain involved and consequent risk to health – with absolutely no benefits – and the fact that the practice is illegal in the majority of countries where it is practiced (Somalia being the latest to ban it in its new constitution) there has been dishearteningly slow progress in eradicating the practice. Nonetheless, the incidence of FGM is gradually declining and an increasing number of men and women in practicing communities support its elimination.⁷⁴

There are many active international, regional and national campaigns against FGM, and many UN agencies are involved in challenging the practice. An

Inter-agency statement on “Eliminating female genital mutilation” was issued by WHO on behalf of 11 UN and UN-related agencies in 2008: (OHCHR, UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCR, UNICEF, UNIFEM, and WHO). It concludes that female genital mutilation is a dangerous practice, and a critical human rights issue: “The United Nations agencies confirm their commitment to support governments, communities and the women and girls concerned to achieve the abandonment of female genital mutilation within a generation.”⁷⁵

Legal prohibition is an essential element of eradication, but concerted community-based action is then needed to put the law into effect. One example is the Gambia Committee on Traditional Practices Affecting the Health of Women and Girls (GAMCOTRAP), which works to protect girls from FGM. They train community-based facilitators who, working in clusters, raise awareness among parents and teach children about their rights. They hold training sessions for circumcisers and support them in alternative employment and income generating activities. They also hold a “dropping the knife” ceremony to celebrate the end of the practice in the community.⁷⁶

FOOD TABOOS

Food taboos often restrict the diet of infants, girls and women. This limits access to vital nutrients and has consequences for the health and wellbeing of the sufferer, as well as the children born to them. These taboos are often based on false superstitious beliefs concerning the negative health and social

beit (GIZ). (2011). *Female Genital Mutilation and Islam*. Retrieved from <http://www.giz.de/Themen/de/SID-29FF532C-C24431DD/dokumente/giz-fgm-EN-islam-2011.pdf>

72 UNFPA-UNICEF Joint Programme for the Acceleration of the Abandonment of FGM/C. (2011). *Key Results and Highlights*. Retrieved from http://www.unfpa.org/webdav/site/global/shared/documents/publications/2012/Annual_Report_2011.pdf

73 Banjul Declaration. A Declaration on FGM by Religious Leaders. Retrieved from http://www.uneca.org/eca_resources/Publications/ACW/old/iac/banjul.htm

74 WHO. (2011). *An update on WHO's work on female genital mutilation (FGM) Progress report*. Retrieved from http://www.who.int/reproductivehealth/publications/fgm/rhr_11_18/en/index.html

75 WHO. (2008). *Eliminating Female Genital Mutilation: An Interagency Statement UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCHR, UNHCR, UNICEF, UNIFEM, WHO*. Retrieved from <http://www.who.int/reproductivehealth/publications/fgm/9789241596442/en/index.html>. See also World Health Assembly 61st Session, *Resolution on Female Genital Mutilation* (WHA61.16). Retrieved from http://apps.who.int/gb/or/e/e_wha61r1.html

76 See the Gambia Committee on Traditional Practices Affecting the Health of Women and Girls (GAMCOTRAP), http://www.gamcotrap.gm/content/index.php?option=com_content&view=frontpage&Itemid=53



A traditional midwife in Iraqi Kurdistan holds ashes that are sifted and applied to the wound after a girl has undergone female genital mutilation. © 2009 Samer Muscati/Human Rights Watch

consequences of eating certain foods.⁷⁷ Conversely, in some societies boys are forced to eat certain types of food against their will and preference in the belief that these types of food make boys more virile as they grow up.

Pregnant women and girls are often faced with additional nutritional taboos. Pregnant women are required to abstain from certain foods/nutrients, resulting in poor nutrition, starvation, and increased labour risks. These taboos also dictate what and when to start feeding the infant, resulting in the denial of important nutrients. Particularly serious is the false belief that the colostrum, the early breast milk containing important antibodies and high levels of protein, is bad or harmful. Other beliefs involve feeding with inappropriate foods. These may impact on the mother and baby and can lead to physical

and mental developmental delays.⁷⁸ Although these practices occur throughout the world they are most common in Africa. Nutritional taboos can have severe consequences including malnutrition, low birth weight, disease, and sometimes death.⁷⁹

WITHHOLDING FOOD/STARVATION

Food and nutrition, both quantity and quality, are withheld from daughters, younger children, or step-children in favour of sons, elder siblings, or biological children respectively.⁸⁰ Additionally, excessive withholding of food and fluids may occur as a misguided treatment for diarrhoea.

77 Institut International Des Droits De L Enfant. (2010). *Children Victim of Harmful Traditional Practices*. Retrieved from http://www.childsrights.org/html/site_en/index.php?c=themes_pres

78 OHCHR. (1995). *Fact Sheet No. 23: Harmful Traditional Practices Affecting the Health of Women and Children*. Retrieved from www.ohchr.org/Documents/Publications/FactSheet23en.pdf

79 Kouyate, M. (2009). *Harmful Traditional Practices Against Women and Legislation*. United Nations Expert Group Meeting Paper. (EGM/GPLHP/2009/EP.07). Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-egms-gplahpaw.htm>

80 Lelieveld, M. (2011). *Child Protection in the Somali Region of Ethiopia*. Retrieved from <http://www.savethechildren.org.uk/resources/online-library/child-protection-somali-region-ethiopia-report-bridges-project>

FORCED FEEDING

Most common in West Africa, forced feeding involves the forced over-feeding of girls and women in the name of beauty and to increase the potential bride price. This is also related to size being correlated with wealth and success in adults. The consequences of this practice include metabolic disorders, diabetes, and hypertension.⁸¹

GANG INITIATION RITES

Adolescents may be required to undergo harmful initiations to gain membership in urban gangs found in many parts of the world, including the United States, Latin American states, the United Kingdom and other European countries. The gang may require the young person to commit a crime (assault, rape, theft), girls to submit to sex with gang members, boys to submit to beatings by the gang or forced tattooing. This latter practice is common in the United States and Central America and can cause the young person to feel they have been marked forever and making it more difficult to leave the gang.

"HONOUR" CRIMES

So-called "honour" killings and assaults are perpetrated against women and girls who are perceived as having transgressed cultural norms and thus brought shame to their families, primarily in Muslim communities. These transgressions are usually based on women and girls making personal choices concerning dress, career, marriage or personal relationships. They are often perpetrated by members of the victim's family and are seen as a way of restoring social position and honour to the family. Although there is no justification in Islamic teaching for such crimes, in countries such as Jordan, Morocco and Syria, "honour" crimes are legally sanctioned and the defence of family honour is considered a mitigating factor.⁸² The violence includes

murder, abduction and physical and sexual assaults. Globally, it is estimated that 5,000 women and girls are killed as a result of this practice each year.⁸³

Such crimes are not exclusive to Muslim communities. Advocates suggest that dowry deaths and so-called crimes of passion have a similar dynamic in that the women are killed by male family members and the crimes are perceived as excusable or understandable.⁸⁴

INITIATION RITES

Many children participate in harmless initiation rites that mark a move from childhood to adulthood and demonstrate a change in the child's social status. However, in certain places in Africa, these traditions include harmful, degrading, and humiliating practices, especially for girls. Often associated with FGM, girls can experience other physical or psychological harm and treatment in connection with these rites. Practices such as confinement, forced public nudity, beatings, rape or coercion to provide sexual services conflict with the right to health, safety and education. If initiation ceremonies conflict with school, children are often forced to miss classes or drop out due to absenteeism or the belief that after initiation, school is unnecessary.⁸⁵ Boys may experience circumcision, scarring or branding in initiation rites, which may lead to health complications, sometimes extreme.

feminist.com/violence/spot/honor.html

81 Kouyate, M. (2009). *Harmful Traditional Practices Against Women and Legislation*. United Nations Expert Group Meeting Paper. EGM/GPLHP/2009/EP.07. Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-egms-gplhpaw.htm>

82 See Spotlight on: Honor Killings. Retrieved from <http://www.>

83 The Working Group on Girls. (2011). *CRC & CEDAW Joint General Recommendation/Comment on Harmful Practices Affecting Girls*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/TheWorkingGrouponGirls.pdf

84 Widney Brown, Human Rights Watch, quoted in National Geographic News, "Thousands of Women Killed for Family 'Honor.'" Retrieved from http://news.nationalgeographic.com/news/2002/02/0212_020212_honorkilling.html

85 Plan International. (2011). *General Comment/General Recommendation on Harmful Practices*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/PlanInternational.pdf

CHILD MARRIAGE

Child marriage, defined here as the marriage of a girl or boy younger than 18 to a spouse of any age, regardless of consent given, continues to be practiced around the globe, most commonly in South Asia and sub-Saharan Africa.⁸⁶ While it affects both girls and boys, girls are significantly more likely to be married as children than boys.⁸⁷ It is estimated that half of married girls live in South Asia, where one in three girls is married before the age of 18 as compared to one in twenty boys.⁸⁸

Protections for children exist under international law, particularly under the Convention on Marriage, Minimum Age for Marriage and Registration of Marriages and CEDAW, both of which require a minimum age for marriage, freely consented to. CEDAW further provides that the betrothal and marriage of "a child" shall have no legal effect. Both the Committee on the Rights of the Child and the Committee on the Elimination of Discrimination against Women have made clear recommendations that marriage should not be permitted for either boys or girls below the age of 18.⁸⁹



Yet many countries do not have laws in place setting a minimum age for marriage at 18.⁹⁰ Many of those with adequate laws in place face challenges in implementation and enforcement.

Child marriages take place for a multitude of reasons, including: poverty and economic burdens; being orphaned or other situations of vulnerability; in situations of conflict/emergencies; through a lack of education; dominant cultural and religious practices, including the belief that

it is better or "safer" for a girl to be married younger; gender discrimination and control; and lack of protection through proper documentation, to name a few.⁹¹

Worse, they encourage and precipitate additional harmful

Drawing by teenager from Burkina Faso during a child rights program. It shows her thoughts on early marriage – the girl is being carried away, in chains, by her new husband. © Plan International

86 UNICEF Child Info. (updated January 2012). "Child Marriage: Progress," Retrieved from http://www.childinfo.org/marriage_progress.html

87 UNICEF. (2011). *Boys and Girls in the Life Cycle*. Retrieved from http://www.unicef.org/media/media_59777.html

88 International Center for Research on Women (ICRW). (2007). *New Insights on Preventing Child Marriage- A Global Analysis of Factors and Programs*. Retrieved from <http://www.icrw.org/publications/new-insights-preventing-child-marriage>. See also UNICEF Child Info. (updated January 2012). "Child Marriage: Progress," Retrieved from http://www.childinfo.org/marriage_progress.html

89 Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). (1994). General Recommendation

No. 21: *Equality in marriage and family relations*. Retrieved from <http://www.un.org/womenwatch/daw/cedaw/recommendations/recomm.htm#recom21>. See also UNICEF. (2001). "Early Marriage: Child Spouses." *Innocenti Digest No. 7*, 1-30. Retrieved from www.unicef-irc.org/publications/pdf/digest7e.pdf

90 UNICEF. (2007). *Child marriage and the law*. Retrieved from www.unicef.org/Child_Marriage_and_the_Law.pdf

91 Plan International. (2011). *Breaking Vows: Early and Forced Marriage and Girls' Education*. Retrieved from <http://www.plan-uk.org/resources/documents/Breaking-Vows-Early-and-Forced-Marriage-and-Girls-Education/>. See also World Vision. (2008). *Before She's Ready: 15 Places Girls Marry by 15*. Retrieved from <http://www.worldvision.org/content.nsf/about/press-development-girls-early-marriage>

practices such as so-called “honour” crimes; marriage by abduction or rape; paying a bride price or dowry; virginity testing; FGM; and exchange marriages. Further, once married, a girl is vulnerable to being the victim of additional harmful practices, such as rape, acid attacks, and stove burning.

The health and life consequences of child marriage for girls are also severe. Girls often leave school to be married, or are removed afterward, and are therefore more susceptible to all the negative life consequences that less education entails, such as lower income and socio-economic status. They are at increased risk of domestic violence, abuse, and rape; higher divorce rates and widowhood and the stigma attached to these in some cultures; and more vulnerable to HIV and sexually transmitted infections. Married girls have early pregnancies before they are sufficiently developed, physically, emotionally, and psychologically, for the experience. They will have more children in shorter intervals and experience greater health complications and risks from pregnancy, including miscarriage, obstructed labour, fistulas, and increased risks of maternal and infant mortality.⁹² For all girls, marriage involves a loss of childhood.

For these reasons, human rights agencies and treaty bodies have energetically sought laws to prevent marriage before the age of 18. However it should be noted that the question of how a minimum age for marriage at 18 relates to the minimum age of consent to sex – commonly set by most countries

below the age of 18 – has still to be addressed.⁹³

Some organisations suggest that it is not in the best interests of all children to rigidly enforce a minimum age of 18 in all circumstances, although there need to be special safeguards to ensure the informed consent of both parties if below that age.

MARRIAGE BY ABDUCTION OR RAPE

This is a form of forced marriage whereby a girl is abducted by a group and her future husband with the intention of being forcibly married. This has been reported as a custom in some areas of Africa, the Caucasus, and Asia.⁹⁴ The process can also involve the raping of a girl and then going to her family to arrange marriage terms in order to avoid shame and dishonour.⁹⁵ In other instances, it is reported that the parents may be involved in planning the abduction.⁹⁶ Would-be grooms may also choose to abduct their future brides to avoid objections to the marriage by the girl’s family. In parts of Ethiopia, this is reportedly leading to “voluntary” abductions – or elopements – though the pressure for and impact of these marriages is still great on the girl, including shaming and ostracism.⁹⁷

92 OHCHR. (1995). *Fact Sheet No. 23: Harmful Traditional Practices Affecting the Health of Women and Children*. Retrieved from www.ohchr.org/Documents/Publications/FactSheet23en.pdf. See also Human Rights Watch. (2011). *How Come You Allow Little Girls to Get Married?* Retrieved from <http://www.hrw.org/reports/2011/12/08/how-come-you-allow-little-girls-get-married>. See also Plan International. (2011). *Breaking Vows: Early and Forced Marriage and Girls’ Education*. Retrieved from <http://www.plan-uk.org/resources/documents/Breaking-Vows-Early-and-Forced-Marriage-and-Girls-Education/>

93 See Legal Age of Consent, <http://www.ageofconsent.com/ageofconsent.htm>

94 UNICEF. (2008). *From Invisible to Indivisible – Promoting and Protecting the Right of the Girl Child to be Free from Violence*. Retrieved from http://www.unicef.org/wcaro/documents_publications_2183.html

95 Wadesango, N., Rembe, S., & Chabaya, O. (2011). “Violation of Women’s Rights by Harmful Traditional Practices.” *Anthropologist*, 13(2):121-129. Retrieved from <http://www.krepublishers.com/02-Journals/T-Anth/Anth-13-0-000-11-Web/Anth-13-0-000-11-Contents/Anth-13-0-000-11-Contents.htm>

96 Kouyate, M. (2009). *Harmful Traditional Practices Against Women and Legislation*. United Nations Expert Group Meeting Paper. (EGM/GPLHP/2009/EP 07). Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-egms-gplahpaw.htm>

97 Boyden, J., Pankhurst, A., & Tafere, Y. (2012). “Child protection and harmful traditional practices: female early marriage and genital modification in Ethiopia.” *Development in Practice*, Volume 22(4): 510-522. Retrieved from <http://www.tandfonline.com/doi/abs/10.1080/09614524.2012.672957#preview>

EXCHANGE MARRIAGES

In areas where girls (and women) are considered as property or commodities, they may be “exchanged” or “given away” in marriage in return for some benefit for their family or male relative. These exchanges may be to strengthen ties between two families, finalize property or land exchanges, or to settle disputes.⁹⁸

Through the system of “Watta Satta,” “Swara,” or “Vani,” approximately 1,000 women and girls are victim to exchange marriages each year in Pakistan. Exchange marriages occur when there is a conflict between families or groups and the women and girls are seen as objects of revenge. These young girls are given for marriage to the opposing group in order to settle the conflict or dispute.⁹⁹ Similarly, in Afghanistan, the practice of “Baad” used in settling disputes, such as an accidental killing or an elopement, involves a girl being given away, often as ordered by a local authoritative body.¹⁰⁰

REFUSAL OF LIFE-SAVING MEDICAL INTERVENTIONS

Parents holding various beliefs may reject essential therapeutic interventions for their child on the grounds that it is forbidden by their faith or ideology. For example, Jehovah’s Witnesses are not permitted to receive blood transfusions; some Hindus object to organ transplants; and Islamic fundamentalists have issued fatwas against

vaccinations. Children’s health may also suffer indirectly from religious belief, as is the case when infants contract HIV from mothers who have the virus because of Catholic edicts against condoms. Religion is not the only reason parents block necessary medical treatment. Belief in alternative medicine (that is to say, treatment that has not been proved effective by scientific trials) leads some parents to reject life-saving interventions in favour of remedies that may prove ineffective or harmful.

When doctors and parents conflict over treatment, it is essential that there is some independent mechanism to decide what is in the best interests of the child. The child’s right to life must trump the parent’s right to guide the child’s religious practice, but in less extreme cases doctors may find ways to treat children without offending their parents’ beliefs. There are some cases in which children themselves refuse life-saving treatment on grounds of their own beliefs. We are not aware of any case in which a child in such a situation has been permitted to die for their faith though some have chosen this course as soon as they become adult.¹⁰¹

MENSTRUATION OSTRACISM

In some countries, women and girls who are menstruating or who have given birth are banned from their home for a period of time. In Nepal, adolescents who are menstruating for the first time may be confined to Chhaupadi houses or huts for as long as 10 days. These huts are generally only a metre in height and width and are made of mud, straw and wood. In addition, they are forbidden from touching milk and water.¹⁰² Some women and girls have died in

98 Plan International. (2011). *Breaking Vows: Early and Forced Marriage and Girls’ Education*. Retrieved from <http://www.plan-uk.org/resources/documents/Breaking-Vows-Early-and-Forced-Marriage-and-Girls-Education/>

99 Zahid, G. (2011). *Legislation and its Implementation to Protect Girl Children under 18 from Harmful Traditional Practices: Importance of the Holistic Approach*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/GulnazZahid.pdf

100 Greiff, S. (2010). *No Justice in Justifications: Violence against Women in the Name of Culture, Religion, and Tradition*. Violence is Not Our Culture: The Global Campaign to Stop Killing and Stoning of Women. Retrieved from <http://www.violenceisnotourculture.org/node/881>

101 For example a 16 year-old Jehovah’s Witness who had leukaemia was compelled by the UK High Court to receive blood transfusions, but after he reached 18 he refused them and died – See court case, E (A Minor) (Wardship: Medical Treatment) 1993 1 FLR 386.

102 International Women’s Rights Action Watch Asia Pacific. (2011). *General Comment: Harmful Practices*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices.

Chhaupadi huts, from hypothermia and fire. Acting on public interest litigation, Nepal's Supreme Court ruled Chhaupadi illegal in September 2005 and directed the government to ensure that it is not practiced.¹⁰³

ORGAN REMOVAL

In addition to sacrificial purposes, some superstitions and traditions involve cutting out organs, often genital organs, of children and using them for sacrificial or traditional ceremonies, resulting in their maiming or death. Vulnerable children, including children with albinism (see below under "Ritual killing"), or children with disabilities may be targeted. Witchdoctors may seek body parts to use as purported "remedies" to address a variety of problems, including appeasement of a deity, to support health, to improve financial problems, or to harm enemies.¹⁰⁴ The practice is considered to be "re-emerging" in recent years as it is reportedly taking place with increasing frequency in Uganda, South Africa and Mozambique.¹⁰⁵

CORRECTIVE RAPE

An apparently "emerging practice," corrective rape is sexual assault perpetrated by men against girls and women they presume or know to be lesbians in order to "convert" them to heterosexuality. Although this is a global phenomenon, it is particularly prevalent in parts of Africa. This form of violence occurs in the larger context of widespread gender-based

violence. Within a society, the narrow definition of "appropriate," or normal gender expression for women, targets all women and female-born individuals who go against these norms.¹⁰⁶

RITUAL KILLINGS

Ritual killings, where children are murdered, at times through torture or ritual, as a sacrifice to spirits or for their body parts in order to increase wealth, cure disease, or obtain superstitious powers has been identified as an emerging issue in a number of African states. The beliefs around child sacrifice permeate various community structures and, as with other harmful practices, children themselves may accept why this practice occurs. In addition, in some areas, it is believed that undergoing other harmful practices such as circumcision will protect one from being sacrificed.¹⁰⁷ Children with albinism may be murdered because it is believed that their organs, limbs, hair and skin hold magical powers. They may be killed so their body parts can be used in superstitious rituals or as "charms" and "talisman". "Under the Same Sun" is actively campaigning against discrimination related to albinism in Tanzania.¹⁰⁸ This practice has also been reported in Swaziland.¹⁰⁹

SEX-SELECTIVE ABORTIONS AND FEMALE INFANTICIDE

With the spread of ultrasound technology, the practice of sex-selective termination of a pregnancy due to the female sex of the foetus, through medical abortions

Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/IWRAWAsiaPacific.pdf

- 103 Infochange India. (2005). "Nepal Supreme Court verdict on chhaupadi paves the way for women's rights." Retrieved from <http://www.infochangeindia.org/women/news/nepal-supreme-court-verdict-on-chhaupadi-paves-the-way-for-womens-rights.html>. See also Hindustan Times. "Ostracism of the impure untouchables." Posted on 7 February 2012. Retrieved from <http://blogs.hindustantimes.com/kurakani-in-kathmandu/2012/02/07/ostracism-of-the-impure-untouchables/>
- 104 Fellows, S. (2010). *Trafficking Body Parts in Mozambique and South Africa*. Retrieved from trafficking-body-parts-in-mozambique-and-south-africa-research-report-2010.pdf
- 105 *Ibid.* See also Jubilee Campaign & Kyampisi Childcare Ministries. (2011). *Child Sacrifice in Uganda*. Retrieved from <http://www.jubileecampaign.co.uk/child-sacrifice-report>

- 106 Human Rights Watch. (2011). *We'll Show You You're a Woman: Violence and Discrimination against Black Lesbians and Transgender Men in South Africa*. Retrieved from <http://www.hrw.org/reports/2011/12/05/we-ll-show-you-you-re-woman>
- 107 Lively Minds Uganda. (2012). *Child Sacrifice Prevention Programme: Final Evaluation Report*. Retrieved from http://www.liveminds.org/2_projects/19/child-sacrifice-prevention-programme
- 108 See <http://www.underthesamesun.com/>; See also CRIN. (2008). *Tanzania: Women attacked in attempted kidnap of Albino children*. Retrieved from <http://www.crin.org/resources/infodetail.asp?ID=18973>
- 109 CRIN. (2012). *Swaziland: Albino girl grabbed by masked man*. Retrieved from <http://www.crin.org/resources/infodetail.asp?id=23110>

or other practices that induce miscarriage or death of the foetus, has become widespread. The low status of women in societies and a traditional preference for male children have made this a significant problem in India, China and other parts of Asia.¹¹⁰ In India, despite legislation banning ultrasound technology for sex-selective abortions, social pressure and technology have contributed to a national ratio of 914 girls being born for every 1,000 boys.¹¹¹ Female infanticide is based on the same forms of gender discrimination, due to preference for male children. Newborn girls are killed as a result of assault, abandonment or neglect.

SEX ASSIGNMENT OF INTER-SEX CHILDREN

In current Western medical practice, infants born with the genitalia of both sexes are often 'assigned' a sex, and can undergo surgical procedures to remove or alter their genitalia to resemble more a male or female infant. More recently, this is being proposed as a violation of the rights of the infant to choose their own identity, including their sex (and gender), and exposing them to both unnecessary physical and psychological health risks.¹¹²

110 See for example Committee on the Rights of the Child concluding observations on China's and India's second periodic reports. Committee on the Rights of the Child (2005). Concluding Observations: China (including Hong Kong and Macau Special Administrative Regions), CRC/C/CHN/CO/2, paras. 28 – 29. Retrieved from <http://www.unhcr.ch/tbs/doc.nsf/%28Symbol%29/CRC.C.CHN.CO.2.En?Opendocument>; See also Committee on the Rights of the Child (2004). Concluding Observations: India, CRC/C/15/Add.228, paras. 33 – 34. Retrieved from <http://www.unhcr.ch/tbs/doc.nsf/%28Symbol%29/CRC.C.15.Add.228.En?Opendocument>

111 Plan International. (2011). *General Comment/General Recommendation on Harmful Practices*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/PlanInternational.pdf

112 Mason, P. (2009). "Pink or Blue?" - A Rights-Based Framework for Medical Intervention with Intersex Infants. Commissioner for Children Tasmania. Retrieved from www.nord-com.net/michel.reiter/postgender/pb.pdf

SHARIA LAW PUNISHMENTS

Human rights treaties forbid inhuman and degrading punishments, which include stoning, flogging and amputations, regardless of the offence or the deterrent effect of the punishment. Those countries applying the version of Islamic law that authorises these punishments are violating human rights. While younger children are protected from such punishments, those reaching puberty are deemed under Sharia Law to be responsible adults, subject to the full force of the law. For example, under the Iranian public law code, puberty is set at 15 years for boys and nine years for girls.¹¹³ In some countries such as Bangladesh and India where Sharia Law is not in force, there is a practice of informal mediation by Islamic scholars or leaders, leading to a social verdict termed a "fatwa." Although legislation in these countries prohibits the implementation of any punishment based on a "fatwa," women and girls may be subjected to different forms of financial, physical and/or humiliating punishment by the community, sometimes even leading to death. According to one estimate, in 2007 there were 35 such fatwa-related incidents of violence committed against women and girls in Bangladesh.¹¹⁴

CUSTOMARY CHILD SLAVERY

Domestic child servants fulfil domestic duties at the home of an employer for an extended period of time. Many of these children are sold or trafficked into domestic servitude or work under slave-like conditions. Since they are hidden in the home and do not appear on any work or school registries, most of these children are "invisible." Studies have estimated that in certain countries up to 50% of girls under age 18 work as domestic servants.¹¹⁵

113 Article 49, Addendum 1 of the Islamic Penal Code of the Republic of Iran. See www.endcorporalpunishment.org/pages/pdfs/states-reports/Iran.pdf.

114 Human Rights Forum on Universal Periodic Review (UPR). (2008). Bangladesh: Stakeholders' Report Under UPR

115 World Vision Australia. (2007). *Letting the Future In: World*

The following are examples of specific domestic slavery practices condoned by culture and tradition:

The Kamalari System: In Nepal, young girls, primarily from poor families who view them as a burden, are sold as domestic labour to more wealthy homes. For many of these girls, education and an acceptable standard of living are denied. Far from support systems and with limited language abilities, these girls are often victims of physical and sexual abuse and even trafficking.¹¹⁶

Restavek: A practice specific to Haiti where poor children from rural areas, including girls and boys as young as five, are sent to “stay with” (literal translation of rest avec) wealthier families in the city and do housework in exchange for room, board, and possibly an education.¹¹⁷ While for some the experience may be positive, for many the exchange in practice results in domestic slavery in degrading treatment and conditions, including gruelling 10–14 hour work days and denial of basic rights, an education, and contact with families.¹¹⁸

Criadazgo: A similar practice in Paraguay, where children as young as five are required to do domestic service, but because they are not formally employed,

do not appear in statistics on working children. The Committee of Experts on the Application of Conventions and Recommendations for the ILO noted that, given the children have no control over their work and are unremunerated, *criadazgo* amounts to slave labour.¹¹⁹

“The human, social and economic costs of denying children’s rights to protection are enormous and unacceptable. Direct costs may include medical care, legal and social welfare services and alternative care. Indirect costs may include possible lasting injury or disability, psychological costs or other impacts on a victim’s quality of life, disruption or discontinuation of education, and productivity losses in the future life of the child.” (para. 16)

Committee on the Rights of the Child, General Comment No. 13, 2011

The Wahaya: In Nigeria and Niger, certain young girls are treated as property and sold into slavery. Eighty-three per cent of girls are sold before 15 years of age and are forced to work with no compensation. As wahaya, they are vulnerable to physical and sexual abuse.¹²⁰

RITUAL SEXUAL SLAVERY

Sexual slavery is a practice whereby young girls, and sometimes boys, are taken through ritual sexual servitude or by individuals as sexual slaves. The following are specific examples:

The Bacha Bazi is an ancient, resurging tradition in Afghanistan where young boys, often orphans or from poor families, are taken as sexual slaves by wealthy men in the community. These men train the boys to dance and entertain gatherings of men, who may sexually abuse them. Some men compete to own and use young boys.¹²¹

Vision and Child Labour in India. Retrieved from <http://wvasiapacific.org/publications/children-in-crisis/letting-the-future-in-child-labour-in-india.html>

116 Plan International. (2011). *General Comment/General Recommendation on Harmful Practices*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/PlanInternational.pdf

117 Restavék Freedom. (2011). *Restavék: The Persistence of Child Labor and Slavery*. Submission to the Universal Periodic Review. Retrieved from [https://www.restavekfreedom.org/assets/restavek/files/\\$cms\\$/104/1549.pdf](https://www.restavekfreedom.org/assets/restavek/files/cms/104/1549.pdf)

118 Colomer, A.G. (2009). “I am Haiti, too! Another step toward the elimination of the Restavek system takes place in Haiti.” Retrieved from <http://jmcstrategies.com/2009/07/06/i-am-haiti-too/>

119 ILO. (2011). *Application of Labour Standards, Report of the Committee of Experts on the Application of Conventions and Recommendations*. Retrieved from http://www.ilo.org/global/standards/WCMS_151490/lang--en/index.htm

120 Mathewson, S. (2012). *He Didn’t Consider Me to Have a Soul*. Anti-Slavery International. http://www.antislavery.org/english/press_and_news/reporter_magazine.aspx

121 Frontline PBS. (2010). “The Dancing Boys of Afghanistan.”

Known as *Devadasi*, *Deuki*, *Devaki*, *Jogini*, or *Mathamma* in South Asia (especially in India and Nepal) young girls from lower castes are often married to a temple deity before or at puberty. These girls are expected to be sexually available to any man in the area and as a consequence, are sexually abused and exploited by priests and worshippers. As a result of this sexual abuse, these girls often become pregnant or exposed to sexually transmitted diseases at an early age. This status is permanent and the girls are stigmatized by the community and prohibited from getting married. These girls are sometimes referred to as the bride of the deity and wife to the village. Children born to these girls suffer discrimination and in some cases inherit the status.¹²²

Trokosi: A practice in Western Africa where young girls are given to fetish temples to live as domestic or sexual slaves. These young girls are often given to the shrines as punishment or penalty for a crime committed by a family member, sometimes even prior to their birth.¹²³

STERILISATION OF DISABLED CHILDREN AND CHILDREN FROM MINORITY GROUPS

Across the world there has been a history of mass-sterilisation of women and children for eugenic or racist reasons, most notoriously in Hitler's Germany but more recently in countries such as Sweden and Canada (people with intellectual disability) or Czechoslovakia (Roma) and Peru (indigenous people).

Retrieved from <http://www.pbs.org/wgbh/pages/frontline/dancingboys/etc/synopsis.html>

122 Minority Rights Group International. (2011). *Submission by Minority Rights Group to the call for Papers on Harmful Practices in Advance of a Joint CEDAW-CRC General Recommendation/Comment on Harmful Practices*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/MinorityRights-GroupInternational.pdf

123 Kouyate, M. (2009). *Harmful Traditional Practices Against Women and Legislation*. United Nations Expert Group Meeting Paper. (EGM/GPLHP/2009/EP.07). Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-egms-gplahpaw.htm>

Mass sterilisation is now deemed genocide under the Rome Statute of the International Criminal Court,¹²⁴ although there are still cases of individual parents seeking and receiving judicial permission to sterilise their children with intellectual disability.

In the Concluding Observations for Australia's fourth periodic report to the Committee on the Rights of the Child, the Committee recommended that the state: "Enact non-discriminatory legislation that prohibits non-therapeutic sterilization of all children, regardless of disability; and to ensure that when sterilization, which is strictly carried out on therapeutic grounds, does occur, that this be subject to the free and informed consent of children, including those with disabilities."¹²⁵

STOVE BURNING

There has been a reported increase, particularly in South Asia and South East Asia, in the use of fire, kerosene, and other stove-related material to burn women and girls as punishment or as an act of domestic violence or discrimination. Reasons include not meeting dowry demands or not giving birth to a male child. The families of the victim often portray the incident as an accident in order to escape legal consequences.¹²⁶

MILK TEETH EXTRACTION

Extraction involves the removal of the milk, or baby teeth, during infancy, though as early as 21 days after birth. This practice is primarily associated with the avoidance or treatment of illness and disease such as diarrhoea or fever at time of milk tooth emergence, or

124 Article 6 of the Rome Statute of the International Criminal Court 1998. See <http://untreaty.un.org/cod/icc/statute/romefra.htm>

125 CRC/C/AUS/CO/4, Concluding Observations: Australia, 28 August 2012, para. 58(f). Retrieved from www2.ohchr.org/english/bodies/crc/docs/co/CRC_C_AUS_CO_4.pdf

126 United Nations. (2009). *Expert Group Meeting Final Report: Good Practices in Legislation on 'Harmful Practices' Against Women*. Retrieved from <http://www.un.org/womenwatch/daw/vaw/v-egms-gplahpaw.htm>

for mitigating the pain of teething.¹²⁷ In certain areas it is also used as a tribal marker. The procedure typically uses unhygienic tools to create an incision in the gums and extract the teeth. A 1998 study found that in Ethiopia 89% of children had undergone milk teeth extraction.¹²⁸ Consequences of this practice include bleeding, tetanus, injury, blood-borne infections and others.¹²⁹

UVULA CUTTING

This practice involves cutting all or part of the uvula, sometimes together with the tonsils. It is used primarily by traditional healers to “treat” medical problems such as diarrhoea, fever, anorexia, to prevent throat infection or headaches, or as part of the naming ceremony.¹³⁰

Practiced in Africa and the Middle East, a 1998 study in Ethiopia estimated that 84% of children had undergone the procedure.¹³¹ Consequences of the procedure can include infection, bleeding and long-term dental problems among others.¹³²

VIRGIN MYTHS

Some young girls are raped because of the myth that having sex with a virgin girl will cure illness, including

HIV, or increase material wealth.¹³³ One particularly vulnerable group to this practice is girls with albinism, who may be at risk of rape because of a similar misguided beliefs that having sex with them can cure HIV/AIDS and that they cannot conceive.

VIRGINITY TESTING

A harmful practice associated with gender discrimination, control of sexuality, and notions of “honour” relating to child marriage. Virginity testing is often undertaken as part of the conditions of marriage and bride price or dowry. The test involves checking to see if a girl’s hymen is intact. It can occur individually, or in groups as part of large ceremonies. The practice humiliates and undermines the bodily integrity and dignity of girls, can cause physical and psychological trauma, and is tantamount to sexual abuse.¹³⁴

Some believe that virginity testing is a protective action that encourages girls to remain virgins, and that in turn will protect them from sexually transmitted infections, including HIV, and pregnancy.¹³⁵ Additionally, proponents claim that it can help identify child abuse in young children.¹³⁶ In South Africa’s Zulu

127 Jeppsson, A., Tesfu, M., & Persson, L. (2003). “Health Care Providers’ Perceptions on Harmful Traditional Health Practices in Ethiopia.” *Ethiopian Journal of Health Development*, 17(1):35-44. Retrieved from <http://www.ajol.info/index.php/ejhd/article/view/9780>

128 Institut International Des Droits De L Enfant. (2010). *Children Victim of Harmful Traditional Practices*. Retrieved from http://www.childsrights.org/html/site_en/index.php?c=themes_pres

129 Assefa, D. et al. (2005). *Module: Harmful Traditional Practices*. Ethiopia Public Health Training Initiative. Retrieved from http://www.cartercenter.org/health/ephti/learning_materials/modules/degree_program.html

130 Prual, A., Gamatie, Y., Djakounda, M., & Huguet, D. (1994). “Traditional Uvulectomy in Niger: A Public Health Problem?” *Social Science Medicine*, Oct; 39(8): 1077-82. Retrieved from <http://www.ncbi.nlm.nih.gov/pubmed/7809661>

131 Institut International Des Droits De L Enfant. (2010). *Children Victim of Harmful Traditional Practices*. Retrieved from http://www.childsrights.org/html/site_en/index.php?c=themes_pres

132 Assefa, D. et al. (2005). *Module: Harmful Traditional Practices*. Ethiopia Public Health Training Initiative. Retrieved from http://www.cartercenter.org/health/ephti/learning_materials/modules/degree_program.html

133 ZAS JPIC Committee. (2010). *Concerns Pertaining to Gender Violence, Child Abuse and Trafficking of Women and Children*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/ZASJPICCommittee.pdf

134 Wadesango, N., Rembe, S., & Chabaya, O. (2011). “Violation of Women’s Rights by Harmful Traditional Practices.” *Anthropologist*, 13(2): 121-129. Retrieved from <http://www.krepublishers.com/02-Journals/T-Anth/Anth-13-0-000-11-Web/Anth-13-2-000-11-Abst-Pdf/Anth-13-2-121-11-720-Wadesango-N/Anth-13-2-121-11-720-Wadesango-N-Tt.pdf>

135 POWA. (2011). *Submission by People Opposing Women Abuse (POWA) to the CEDAW Commission on Virginity Testing as a Harmful Traditional Practice*. Submission to Joint CEDAW-CRC General Recommendation on Harmful Practices. Retrieved from http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/PeopleOpposingWomenAbuse.pdf

136 Le Roux, L. (2006). *Harmful Traditional Practices, (Male Circumcision and Virginity Testing of Girls) and the Legal Rights of Children*. Masters’ Thesis, Unpublished. Retrieved from <http://www.openthesis.org/documents/Harmful-traditional-practices-male-circumcision-502420.html>

population, virginity tests can be conducted annually as part of celebrations, and girls proudly display and celebrate “passing” with song and dance and coloured marks on their faces.¹³⁷ These public displays are criticised for endangering girls’ risk of rape, given the harmful superstition that having sex with a young virgin will prevent or cure HIV/AIDS.¹³⁸

WITCHCRAFT

There is a widespread belief in witchcraft throughout sub-Saharan Africa. It is reported that the number of young children accused of witchcraft is increasing.¹³⁹ Some children are thought to be born witches and others become witches. Children are often accused of witchcraft by adults who have close relationships with them, such as parents, step-parents, other relatives, or pastors, for example.¹⁴⁰

A child who is accused of witchcraft is subject to both physical and psychological violence by family, community members, and religious leaders. These children are stigmatized and discriminated against, are mistreated, abused, ostracized, and abandoned. They may be taken to churches for “deliverance” and can become victims of extreme violence, including severe

beatings, being burnt, poisoned, or even buried alive, and killed.¹⁴¹ Even if the child is not physically harmed, the allegation that they are a witch or possessed of evil spirits causes a lasting trauma. Therefore making such allegations must be explicitly prohibited and challenged, along with the other forms of violence involved.¹⁴²

Children who are accused of witchcraft or spirit-possession are generally those who are already vulnerable. They include children with disabilities; children whose births were considered unusual; children who have lost one or both parents; children whose family experiences misfortune shortly after their birth; children whose parents have been accused of witchcraft; children living away from home in foster homes or domestic service; and children who are gifted, or left-handed or who exhibit unusual or challenging behaviour. A major group of victims are children with albinism, who in some areas are branded as witches or otherwise mistreated and neglected.

One difficulty with challenging this form of violence is that mainstream religions such as Christianity and Islam support a belief in spirit-possession and the exorcism of spirits, so there is a reluctance to ban “witch-branding” or the accusation that a child is possessed, even though this is proven to cause lifelong scars. Nonetheless some African states or provinces, for example in Nigeria and South Africa, have taken energetic measures to prohibit the abuse of children as a result of witch-branding.

See also “Virginity Testing: Increasing Health Risks and Violating Human Rights in the Name of HIV-Prevention,” SIECUS, Retrieved from <http://www.siecus.org/index.cfm?fuseaction=Feature.showFeature&featureID=1199>

137 “Zulu king condemns photos of virginity tests at annual dance,” *The Guardian*, 14 September 2010, Retrieved from <http://www.guardian.co.uk/world/2010/sep/14/zulu-dance-virginity-test-photos>

138 *Ibid.* See also Wadesango, N., Rembe, S., & Chabaya, O. (2011). “Violation of Women’s Rights by Harmful Traditional Practices.” *Anthropologist*, 13(2): 121-129. Retrieved from <http://www.krepublishers.com/02-Journals/T-Anth/Anth-13-0-000-11-Web/Anth-13-2-000-11-Abst-Pdf/Anth-13-2-121-11-720-Wadesango-N/Anth-13-2-121-11-720-Wadesango-N-Tt.pdf>

139 UNICEF WCARO. (2010). *Children Accused of Witchcraft: An Anthropological Study of Contemporary Practices in Africa*. Retrieved from <http://www.unhcr.org/refworld/docid/4e97f5902.html>

140 UNICEF (2008). *The causes and prevalence of accusation of witchcraft among children in Akwa Ibom state*. Retrieved from www.elombah.com/AKWA%20IBOM.pdf

141 Human Rights Watch. (2006). *What Future? Street Children in the Democratic Republic of the Congo*. Retrieved from <http://www.hrw.org/reports/2006/04/04/what-future>; Stepping Stones Nigeria. (2010). *Report on Accusations of Witchcraft Against Children in Akwa Ibom State, Nigeria*. Retrieved from <http://www.steppingstonesnigeria.org/publications-a-research.html>; See also UNICEF WCARO. (2010). *Children Accused of Witchcraft: An Anthropological Study of Contemporary Practices in Africa*. Retrieved from <http://www.unhcr.org/refworld/docid/4e97f5902.html>

142 UNICEF WCARO. (2010). *Children Accused of Witchcraft: An Anthropological Study of Contemporary Practices in Africa*. Retrieved from <http://www.unhcr.org/refworld/docid/4e97f5902.html>

RECOMMENDATIONS



The issue of FGC in Sierra Leone has become a serious concern over the years as several lives of teenagers have been lost as a result of the practice. Children are kept out of school to attend initiation rites, and some girls are not sent to school at all so they can be trained to become initiators. Due to the cultural and traditional beliefs attached to the practice, society in general is silent over the issue of FGC. In most cases, consequences of FGC are associated with 'witchcraft' and there is the tendency to deny that they are related to the practice. Breaking the Silence for Girls' Rights is a three-year project to raise awareness for changing attitudes and practices towards abandoning the practice of female genital cutting commenced implementation in January 2008. © Plan International

5. Recommendations

This report and its recommendations use “child” as defined in the CRC to mean every human being below the age of 18.

INTEGRATION INTO FOLLOW-UP TO THE UN SECRETARY-GENERAL’S STUDY ON VIOLENCE AGAINST CHILDREN

We reiterate the assertion of the UN Secretary-General’s Study on Violence against Children: no violence against children is justifiable; all violence against children is preventable. We call for universal recognition that:

- Neither tradition, culture, religion nor superstition can justify harmful practices that violate children’s rights, including their rights to life, maximum development and to protection from all forms of violence.
- In every state, such practices and social approval and justification for them persist and affect both girls and boys of all ages.
- In some cases, such practices are home-grown, while others have spread with migration and through modern information technology. There are also new, emerging practices.
- Gender discrimination is inherent in many of these practices. Others threaten and affect certain groups of children disproportionately, including in particular children with disabilities. This requires special attention.
- States have immediate human rights obligations to ensure these practices are prohibited and to exercise due diligence by taking all necessary measures to eliminate them in reality. Governance structures should include departments/ministries with clearly established responsibilities for fulfilling the state’s children’s rights obligations.

In continued work to implement the overarching recommendations of the UN Secretary-General’s Study on Violence against Children, states and others should ensure that:

1. Existing and developing national strategies, policies or plans of action on violence against children fully address harmful practices based on tradition, culture, religion or superstition;
2. All such practices are effectively prohibited, when necessary explicitly, with particular attention to ensuring there are no provisions enabling parents or others to consent to/authorise such harmful practices; that prohibition is upheld explicitly in states with multiple legal systems including customary and/or religious law; that prohibition extends effectively not only to direct perpetrators but to those facilitating, arranging or offering the child for these practices;

3. In prioritising prevention of all forms of violence, recognition of the additional difficulties of challenging violence currently justified through tradition, culture, superstition or religion should be given special attention;
4. In striving to transform attitudes which condone or normalize violence against children, harmful practices based on tradition, culture, religion or superstition should be identified and targeted;
5. Training and capacity-building of all those working with and for children and families should highlight children's right to protection from these practices and their prevention and elimination;
6. Recovery and social reintegration services should be available for all child victims of these practices;
7. Children's ethical, safe and appropriate participation in the identification of and challenge to these practices is assured in compliance with their right to have their views heard and given due weight. There must be recognition that in the face of widespread social approval, children may not recognise the practices as violations of their rights;
8. The reporting mechanisms available to children and their representatives must be safely accessible to enable the reporting of these harmful practices, taking into account the special difficulties for the child and their advocates caused by the dominant approval of the practices; reporting must lead to appropriate action to protect children, in their best interests. Reporting mechanisms and referral must respect the right of children to have their views heard and given due weight;
9. Responses to reported harmful practices must ensure accountability and appropriate remedies and end impunity. Those who are involved directly or indirectly in the perpetration of these practices should be prosecuted in accordance with criminal law; where parents are involved, decisions on prosecution and intervention should carefully consider the best interests of the child;
10. A gender perspective should inform the identification of and response to these practices;
11. In the development of systematic data collection and research on violence against children, special efforts should be made to investigate the incidence and prevalence of these practices and attitudes toward them, including through confidential research interviews with children and parents;
12. International commitment to challenge the justification of harmful practices against children should be strengthened (other recommendations address this in greater detail).

Global, UN-led action against harmful practices based on tradition, culture, religion or superstition has to date largely focused on female genital mutilation, child marriage, honour crimes and other practices particularly affecting girls and women. While not wishing to divert attention in any way from these very serious and persisting rights violations, we encourage in addition a UN-led, high-profile and children's rights-based global campaign to identify, analyse and eliminate the whole range of harmful practices affecting children based on tradition, culture, religion or superstition.

RECOMMENDATIONS ADDRESSED TO INTERNATIONAL AND REGIONAL BODIES

We urge all UN and UN-related bodies whose mandates enable them to address these practices to do so, including but not limited to **OHCHR, UNAIDS, UNDP, UNECA, UNESCO, UNFPA, UNHCR, UNICEF, UNODC, UN Women and WHO.**

There is an immediate need for a web-based clearinghouse of examples of effective legal frameworks, appropriate enforcement and other additional measures to eliminate these harmful practices. This should include:

- Models of legislation framed or used to prohibit and eliminate harmful practices that provide individual children and their representatives with effective remedies, including compensation;
- Examples of effective and appropriate implementation and enforcement of prohibition;
- Detailed information on programmes and measures taken at regional, national, and local levels to support prohibition and ensure the rapid elimination of these practices;
- Evaluations of the effectiveness of legislation and other measures on the realisation of the full range of children's rights, free of such harmful practices.

Overall, we commend the process and outcomes of the work of the **Division for the Advancement of Women (now part of UN Women)** on harmful practices affecting women and girls and suggest that a parallel process is urgently required to address the full range of harmful practices based on tradition, culture, religion or superstition that affect children (see <http://www.un.org/womenwatch/daw/public/publications.htm>)

We encourage the **Commission on the Status of Women's** 57th session (4 – 15 March 2013, UN headquarters, New York) with its priority theme on the "Prohibition and elimination of all forms of violence against women and girls" to consider the full range of

harmful practices based on tradition, culture, religion or superstition that affect girls. (see <http://www.un.org/womenwatch/daw/csw/57sess.htm>)

The **Committee on the Rights of the Child** in its reporting procedure should continue to monitor harmful practices, questioning states rigorously on any practices based on tradition, culture, religion or superstition and challenging states to prohibit and eliminate them urgently. The Committee should ensure that in developing its General Comment on the child's right to health, it provides guidance on protection of the child from harmful practices perpetrated through false beliefs about child development and the causes and treatment of childhood illness and disability. The Committee should consider developing a General Comment on "The child's right to freedom of religion," emphasising protection from harmful practices based on religion.

Similarly, other **UN Treaty Bodies, and also regional human rights monitoring bodies,** should within their mandates and their reporting procedures address these practices and pursue their prohibition and elimination.

The **Office of the High Commissioner for Human Rights** is urged to ensure that its current (2012) study on the child's right to health has a special focus on identification, prevention and response to harmful practices perpetrated through false beliefs about child development and the causes and treatment of childhood illness and disability. These may stem from religious edict (eg opposition to blood transfusions) or religious belief, or from tradition or superstition, or in some cases be promoted by health practitioners, including "traditional" practitioners.

The **Human Rights Council** should ensure that its next full-day meeting on children's rights in March 2013 – on the right of the child to the enjoyment of the highest attainable standard of health – includes a

segment on combatting harmful practices that conflict with this right.

States and other stakeholders involved in the second cycle of the **Universal Periodic Review** are urged to raise harmful practices affecting children based on tradition, culture, religion or superstition in reports, briefings, and questions and recommendations.

Special Procedures of the Human Rights Council:

The following Special Procedures, among others, as well as country mandate holders are encouraged to consider harmful traditional practices based on tradition, culture, religion or superstition within the scope of their mandates and make appropriate recommendations for their prohibition and elimination; for example:

- Special Rapporteur on the right to education: harmful initiation practices related to schooling and the impact of harmful practices based on tradition, culture, religion or superstition on children's right to education.
- Special Rapporteur on the right to food: harmful practices related to nutrition and food.
- Special Rapporteur on the sale of children, child prostitution and child pornography: sexual exploitation of children based on tradition, culture, religion or superstition.
- Special Rapporteur on violence against women, its causes and consequences: the full range of harmful practices based on tradition, culture, religion or superstition.
- Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment: assessing practices based on tradition, culture, religion or superstition which amount to torture or to cruel, inhuman or degrading treatment or punishment of children.
- Special Rapporteur on freedom of religion or belief: harmful practices affecting children based on, or claimed to be based on, religious edict or belief.

- Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health: harmful practices perpetrated against children through false beliefs about child development and the causes and treatment of childhood illness.
- Special Rapporteur on contemporary forms of slavery, including its causes and its consequences: harmful traditional or religious practices which amount to contemporary forms of slavery.
- Special Rapporteur on trafficking in persons, especially women and children: harmful practices based on tradition, culture, religion or superstition that involve trafficking.

The Special Representative to the UN Secretary-General on Violence against Children

should continue to give global leadership and priority to addressing these issues, building on the International Expert Consultation held in Addis Ababa, Ethiopia in June 2012, on "Protecting girls and boys from harmful practices in plural legal systems." This meeting was hosted by the Special Representative to the Secretary-General and Plan International and co-organized with the African Committee of Experts on the Rights and Welfare of the Child, the Committee on the Rights of the Child, UNICEF, the International NGO Council on Violence against Children and the African Child Policy Forum.

Regional inter-governmental organisations are encouraged to place this issue on their agendas and promote analysis and action within their regions.

Involvement of international and regional religious bodies in challenging and ending harmful practices based on religion

Those at the highest level of religious leadership of the major religions should be invited to discuss and commit to initiatives to increase the global impact of work to end harmful practices against children. Religious leaders should be at the forefront

of advocating for implementation of the CRC and demonstrating that the CRC reflects values shared by the world's major religious traditions.

Councils, heads and spiritual leaders of all the major religions and denominations, together with any child protection authorities within them, should carry out a children's rights-based review of practices linked to their religion which may directly or indirectly harm children and systematically support their prohibition and elimination. Any relevant religion-based law should be reviewed for its full compliance with the CRC and other human rights instruments. The review should note that the Convention on the Rights of the Child (Article 14) upholds the *child's* right to freedom of religion, requiring states to respect parents' rights and duties to provide direction to the child in the exercise of his or her right, in a manner consistent with the evolving capacities of the child.

International and regional religious and inter-faith bodies, including but not limited to those listed below, should place the issue of religion-linked harmful practices affecting children on their agendas, working at national, regional and international levels to identify and condemn all such practices and to support moves to prohibit and eliminate them:

- African Council of Religious Leaders (ACRL)
- All Africa Conference of Churches (AACC)
- Caribbean Conference of Churches
- Council for a Parliament of the World's Religions
- Ecumenical Advocacy Alliance
- Fellowship of Christian Councils of Churches of Central Africa (FOCCOCA)
- Global Network of Religions for Children (GNRC)
- Global Women of Faith Network
- Global Working Group on Faith & SSDIM (Stigma, Shame, Denial, Discrimination, Inaction and Mis-action)

- Inter-Faith Youth Core (IFYC)
- Latin American and Caribbean Council of Religious Leaders
- Latin American Council of Churches
- Organisation of Islamic Conference (OIC)
- Religions for Peace
- United Religions Initiative, Southeast Asia and the Pacific

World Council of Churches (WCC): we recommend inclusion of the issue of harmful practices based on religion that violate children's rights on the agenda of the 10th World Assembly, Busan, South Korea, whose theme is: "God of life, lead us to justice and peace."

The **World Day of Prayer and Action for Children** should consider a special focus on ending harmful practices linked to religion during 2013, the final year of its current three-year theme "Stop violence against children." (see <http://www.dayofprayerandaction.org/>)

World Interfaith Harmony Week, adopted by the UN General Assembly in October 2010 and celebrated during the first week of February each year could be a powerful instrument to promote a culture of peace and advocate for the elimination of harmful religious practices. (see <http://worldinterfaithharmonyweek.com/>)

RECOMMENDATIONS FOR ACTION AT NATIONAL AND LOCAL LEVELS

As noted above, there should be systematic and rigorous national children's rights-based reviews of harmful or potentially harmful practices based on tradition, culture, religion or superstition affecting children, and particular groups of children. This requires government-led coordination of all stakeholders, including for example the media and traditional and religious leaders.

We commend to state governments, authorities and others the **detailed recommendations provided by the Committee on the Rights of the Child** in its General Comment No. 13 on the right of the child to freedom from all forms of violence, on the legislative, administrative, social and educational measures to be taken by States. (GC No. 13 (2011), CRC/C/GC/13, 18 April 2011, paras. 38 – 58 in particular; see http://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf.)

National legislation should be reviewed and reformed

to ensure there are no provisions enabling parents or others to consent to/authorise such harmful practices; that prohibition is upheld explicitly in states with multiple legal systems including customary and/or religious law; that prohibition extends effectively not only to direct perpetrators but to those facilitating, arranging or offering the child for these practices.

The **educational purpose and value of clear and explicit legal frameworks** should be highlighted: laws prohibiting all such harmful practices should be widely disseminated in all

regions to all parents and to all those working with or for families and children. Knowledge of the law, of children's rights and of the harmful impact of these practices should be built into health and educational programmes serving children, families and communities and into the training – initial and in-service – of all those working with and for children and families.

As part of their overall national plan or strategy to end all forms of violence against children, states should develop and implement a **comprehensive strategy to raise awareness** and inform the general population of harmful practices based on tradition, culture, religion or superstition that violate children's rights, as well as their causes and impact.

“The Committee acknowledges and welcomes the numerous initiatives developed by Governments and others to prevent and respond to violence against children. In spite of these efforts, existing initiatives are in general insufficient... Widespread social and cultural attitudes and practices condone violence. The impact of measures taken is limited by lack of knowledge, data and understanding of violence against children and its root causes, by reactive efforts focusing on symptoms and consequences rather than causes, and by strategies which are fragmented rather than integrated. Resources allocated to address the problem are inadequate.” (para. 12)

Committee on the Rights of the Child, General Comment No. 13, 2011

Community campaigns for elimination of these practices based on various forms of action including public declarations and pledges, etc., have been particularly effective; information on them should be widely available.

Those who own or work in the **mass media industry**, including new and emerging forms of social media, should ensure they fulfil their potential for challenging these harmful practices.

Widespread education on the Convention on the Rights of the Children and its critical importance to the healthy development of all children needs to be provided to all those who work with or for children and to children themselves. Children's rights education in school has been demonstrated to empower children to participate meaningfully in decisions that affect them and to advocate for the respect of rights for their peers. Its effects generalize to teachers and parents.

School curricula should be reviewed to ensure they support the elimination of these practices, including reviewing religious education, where it forms part of the school curriculum, to ensure that it challenges harmful practices based on religion.

The role of NGOs and of independent human rights institutions, children's ombudspersons and commissioners, etc., is crucial; for example:

- Researching and ensuring visibility for all harmful practices based on tradition, culture, religion or superstition that affect children in their state. NGOs and NHRIs must bring evidence of existing and emerging harmful practices (including those that may have been driven underground) to light;
- Emphasising that these practices are rights violations and highlighting their harmful impact to combat persisting approval, which may be based on tradition, culture, religion or superstition;
- Ensuring that debates on specific persisting harmful practices in the state are kept on the national agenda, including media, and promoting a public consensus on the need to eliminate all such practices;

- Facilitating the ethical and safe participation of children, including child-led organisations, in action to identify and challenge these harmful practices;
- Advocating strongly for governments to fulfil their children's rights obligations to prohibit and eliminate all harmful practices based on tradition, culture, religion or superstition;
- Monitoring the effectiveness of government action;
- Providing pilot projects, materials and programmes to challenge harmful practices;
- Briefing international and regional human rights mechanisms and other bodies, including those identified above, to ensure increased international pressure for universal prohibition and elimination;
- Ensuring international cooperation in the exchange and dissemination of information on the effective prohibition and elimination of these practices.

Governments are urged to recognise the essential role of NGOs and national human rights institutions and provide necessary resources for their work.

Health practitioners should be encouraged to work actively to eliminate these harmful practices as part of their codes of ethical conduct. They should abide by the World Medical Association (WMA) Declaration of Geneva (adopted by the 2nd General Assembly of the WMA, Geneva, Switzerland, September 1948 and amended by successive General Assemblies; see <http://www.wma.net/en/30publications/10policies/g1/>). This states, *inter alia*, that:

- "The health of my patient will be my first consideration; [...]"
- I will not permit considerations of age, disease or disability, creed, ethnic origin, gender, nationality, political affiliation, race, sexual orientation, social standing or any other factor to intervene between my duty and my patient;

- I will maintain the utmost respect for human life;
- I will not use my medical knowledge to violate human rights and civil liberties, even under threat; [...].”

As recommended to international and regional bodies above, **religious and faith-based bodies** at national and local level and their child protection authorities should carry out a children’s rights-based review of practices linked to religion that may directly or indirectly harm children; their prohibition and elimination should be systematically supported. Any relevant religious-based law should be reviewed for its full compliance with the CRC and other human rights instruments.

The review should note that the Convention on the Rights of the Child (Article 14) upholds the *child’s* right to freedom of religion, requiring states to respect parents’ rights and duties to provide direction to the child in the exercise of his or her right, in a manner consistent with the evolving capacities of the child.

Church authorities should ensure the availability of safe and accessible systems for reporting these harmful practices, integrated into national child protection systems and independent of church authorities.

Multi-religious partnerships and cooperation provide collective energy and resources: a consultation of religious and spiritual leaders should be convened to form an action plan/agreement/pledge/declaration.

Partnership and multi-religious cooperation at local and national level should form part of overall action plans. Strategies for engaging with and forming partnerships with religious communities, especially where they are major service providers, should be a priority.

Theologians, religious teachers and university-based religious scholars can play an important role in articulating and interpreting the beliefs, teachings and laws of religious communities, in the light of the CRC and other human rights instruments; their role in challenging faith-based justification for practices that are harmful to children is vital.



Child's View – Rina Begum, 14, stands outside her parents' home, in the northern district of Jamalpur in Dhaka Division. Rima, whose education was cut short at Grade 6, was taken out of school to marry. Her husband beats her and has sent her back to her parents. He hopes to secure additional dowry. © UNICEF NYHQ2009-2316 / Humaira Yasmin Sheba